

from
TRAUMA
to
TRANSCENDENCE



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Trauma into Transcendence: the four stages of trauma work

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Introduction: Everyone experiences trauma

We often view traumas as awful, crippling, and debilitating—which can all be true at the time of the disaster and post traumatically after the disaster. But what happens if we view traumas as ordeals we need to face and transcend? Can they lead us to be stronger, wiser, and more loving? I believe so.

For example:

I walk into my waiting room and greet Nancy and Frank, both visibly frightened and angry. They barely look at each other as we proceed into my office. Nancy sits down and immediately starts firing: “He’s been cheating on me for *14 months!* He’s been lying and taking her skiing and to Reno! I can’t eat, I can’t sleep, I can’t think of anything else. Fuck you Frank! I’ll never get over this and I’ll never forgive you!”

I’d been working with Frank and Nancy for months now, and this is news to me too. I’m not that shocked or surprised, but I do instantaneously reconfigure my understanding of each of them and their marriage. They are neck deep in the crazy swamp here. This is the most serious crisis they’ve faced in their twelve years together, and both of their nervous systems are reeling with traumatic shock and a horrible new reality.

Nancy is disoriented with the betrayal and trying to figure out if she needs to divorce Frank because she can never trust him again. Is he a narcissist? Is he a sociopath? The answer is “Maybe” to both questions and this is intolerable to her.

Frank is terrified of losing Nancy and their kids—they have a six-year-old daughter and nine-year-old son, both of whom he adores—and he also loves Nancy. Even more, he *desires* her, and has recently tired of his lover Cristi whom (I find out later) has increasingly been making demands. Right now, he wants Nancy and his family more than anything and he is literally sweating with guilt and remorse. “I’m so sorry Nancy! I don’t know how it happened!” He’s beginning to have a panic attack as he speaks, and all Nancy can do is keep unloading on him with utter contempt and rage.

Two years later

Two years later they come in happily in love. Their issue today is their son’s attention difficulties at school, and they have a romantic four-day trip planned this weekend for them to go stay at the Lavender Inn in Ojai California while her parents take care of the kids.

In *this* session, Frank and Nancy are living a happy ending at the beginning of something wonderful. How did this happen? It took a lot of work, but the bottom line is, they turned their trauma into transcendence.

This is a book about *happy endings*. We humans are crazy powerful. If we turn towards healing and growth long enough, we eventually either die, or feel like we're living a happy ending at the beginning of something wonderful. It doesn't matter how dark it starts—abusive childhoods, neglectful parents, rapes, assaults, affairs, military deployments, you name it—the most horrendous, unfair, or banal problems people can suffer can all result in trauma programming, where past learning degrades our current experience. These burdens are cards some of us are dealt and, once dealt, become *ours*. If we face our pain and keep moving towards healing and growth, we'll eventually be living a happy ending, at the beginning of something wonderful.

Trauma doesn't explain all suffering

This is a book about how trauma shapes us and what we can do to resolve it into growth. That being said, there are other sources of bad habits and human problems. We are born with bodies and temperaments that work better or worse in different families and communities, and normal developmental experiences in various cultures have differing effects on how we function. For a deeper dive into the complexity of how we develop problems, you can go to Appendix 4: *A triple threat model of human suffering*.

Big T traumas

Have you ever had a traumatic experience? A personal catastrophe like a molest, assault, war injury, or car wreck is what most people think about when asked this question, but yours might also be discovering an affair like Nancy did, surviving a wildfire, losing a family member, or suffering a catastrophic illness. Some children endure chronic Big T trauma, injuring their nervous systems and personalities. Francine Shapiro—the inventor of Eye Movement Desensitization Reprocessing (EMDR)—calls such major bummers, “Big T traumas.”¹ These are

horrific events that we remember for a lifetime. It's an inspiring testament to human resilience that 80% of people who experience a Big T trauma are fine afterwards, mostly having no lingering bad effects.² How is it with *your* traumatic experience as you think about it? You might feel "OK, no big deal," or you might be having distressing feelings, sensations, images, and self-criticisms as you remember the event. If you don't feel wiser and stronger as a result of your experience, you might benefit from some trauma work.

Frank and Nancy were Big T traumatized at her discovery of his affair.

Nancy was lost in her betrayal. The world had shifted, distorting everything, and leaving her with an unreal sense of self. She actually felt most alive attacking Frank. She wasn't lost in terror when she attacked him. Raging at him to somehow get him to *feel* her suffering organized her inner chaos. In that initial session she kept asking, "How could you do this to *me*, to our *children*?!"

Frank was blanked out. His body slumped and he could barely talk in the early sessions after the revelation. He was so shut down that all he could do was keep apologizing, "I'm sorry! I don't know why I did it. No! I don't want her! I still want you."

Both their nervous systems and their *combined* nervous systems—their unique relational network of shared knowledge, energy, and commitments—had been injured and rewired. Even worse, the affair was now *theirs*. Their relationship, their sexuality, their sense of personal identity were all changed forever. At the beginning after Nancy found out, the whole situation felt like an endless nightmare to both, with no waking up in sight.

This is one response people can have to acute Big T traumas—they feel like their life is exploding and completely out of control. The best thing Nancy and Frank had going for them was that they wanted to get back to love and were willing to do the work. Angela Duckworth defines grit as "passion and persistence,"³ and they had a lot of grit.

One of my first jobs was to help them talk about the affair, the consequences, and all the meanings they created from the whole experience. Learning how to talk coherently about what happened is the first stage of trauma treatment.

Small t traumas

Small t traumas are distressing life experiences that often look normal—a pushy older brother, a contemptuous parent or teacher, or managing dyslexia in a school that doesn't register the problem. Sometimes such experiences generate problems, blocks, and bad habits. We actually experience more post-traumatic problems from lesser “small t” injuries like grade school humiliations, scary or neglectful parents, an emotionally abusive spouse, or a secret shame that we can't bring ourselves to tell anyone.⁴ Everyone experiences at least some of these, and occasionally small t traumas cause lingering pain—reflected in bad habits, negative beliefs about yourself or others, or unwillingness to take risks or lead a full life. Mostly, as with Big T traumas, we emerge strengthened and toughened from developmental struggles, but sometimes we are sensitized and weakened, and need to do trauma work to integrate and heal.

Frank was raised by an emotionally abusive father, and a codependent passive mother. His response to these pervasive small t traumatic interactions was to keep anger to himself and to express his distress with indirect angry acts (passive aggressive behaviors), like flunking chemistry in high school or forgetting his mother's birthday. He created conspicuous success as an entrepreneur but was seduced by all the accolades and attention. When Frank felt neglected by Nancy (whom, like many modern mothers, felt overwhelmed raising two small children), he talked himself into feeling entitled to pursue his yoga teacher, Cristi, who was flattered by his attention and attracted to his wealth. Often the transition into parenthood wreaks havoc with a couple's sex life, and sex was particularly important to Frank. Making love was one of the few times he felt secure and fulfilled as a man. Months before the affair was revealed, Frank and Nancy came into

therapy with the express purpose of improving their sex life, and now I was realizing why they weren't making more progress!

When it all blew up, Frank essentially regressed to a four-year-old being bullied by his father, collapsing into numb shame. The cumulative programming from all his small t traumas had left him vulnerable to cheating and lying when he had the opportunity with beautiful and willing Cristi. It had also left him with the defense of numbing out and shutting down in the face a family member's rage.

Small t traumas might not look like much from the outside, but *our nervous systems* found them alarming enough that they rewired in some fashion to protect us. What might be the source of small t traumas?

- The kid who bullied you when you were in the fourth grade.
- The sixth-grade girl who told you your hair looked stupid and your teeth were yellow (Linda Robinson, and I remember it like it was yesterday).
- Your mother, overcome with drunken fury, screaming, "I hate you! I wish you were dead!"
- The time your father laughed and teased you when you told him you liked the cute boy in the sixth grade.
- Your family forgetting to pick you up from school, and you having to wait forty-five minutes in the dark and cold wondering if they'd forgotten about you.
- Your brother who used to physically dominate or emotionally humiliate you (or maybe you tormented your brother, and then felt overwhelming shame and regret).

These are small t traumas. They're inevitable in life. Since there are more post-traumatic stress reactions from small t traumas than big T traumas, the key to understanding trauma programming is to focus on

the magnitude of the *effect* on our emotional programming, not the apparent severity of Big T or small t events.

We prefer healing and growing

As we'll see in the chapters to come, *at every age*, from infancy to late adulthood, we can heal through toxic trauma into fulfilling lives.

Our body/mind/spirit systems prefer healthy and happy states and warmer relationships. Our unconscious selves choose happy endings if given a chance by our conscious selves—the conscious *you* who is reading this.

Trauma and resilience are forms of memory

Memories are there to help us navigate the world, mostly for the better, sometimes for worse. We humans are miraculous memory machines! Some neuroscientists call human brains instruments of association and anticipation, powered by memories.⁵

- *Implicit* memories are programmed reactions to the world that don't feel like memories but show up as preferences and reactions. You might not remember the bearded guy who scared you as a one-year-old, but you might not like bearded guys—an implicit trauma memory. Beginning in the third trimester when we encode **implicit memories** of unity with the universe, our unconscious continually processes experiences and creates habits and associations (memories) that help us manage our lives.
- Procedural memories are all our bodily activities and expressions. Trauma memories are embodied in posture, tone, movement, touch, facial expression. Riding a bicycle, kicking a soccer ball, tying our shoes, standing up, are all procedural memories.
- At around 18 months, when our brain's hippocampus develops enough, we start having *explicit* episodic memories of events that can be remembered much later and recognized as memories.
- We have procedural memories of how to walk, move, ride a bicycle, or open a can.
- We have short-term memories of the last few minutes.

- We have long-term consolidated memories of material we've dreamed about and locked into our life stories.
- Importantly, we have working memories where our unconscious is constantly responding to the present moment by taking 7 plus or minus 2 elements and weaving them into stories that explain the world to us and guide us with feelings and impulses in how to understand and act.

All of these memories can be hijacked and distorted by trauma learning.

Trauma and resilience are two related forms of *memories*.

- **Trauma memories:** Traumatic memories—destructive emotional/cognitive/behavioral habits arising from previous painful experiences—can be triggered by anything that reminds us of the unpleasant experiences. Even though we hate the fear/anger/shame states that come with these memories, they persist because our adaptive unconscious selves decided that the fear/anger/shame states protected us somehow—they are *defensive states*. Brains are reluctant to change anything associated with protection/survival, so defensive states are deeply hardwired.⁶ If we're not indulging defensive states, most of us try to avoid or fight against them, which can make the states become more and more frightening and infuriating. As we keep getting activated by reminders of our trauma, it takes less and less of a trigger to evoke more and more traumatic responses, leaving us disconnected and conflicted. This less-trigger-leading-to-more-distress is called *sensitization*. Nancy was so sensitized by Frank's affair that she couldn't hear the words, "Affair," "Other woman," or "Reno (one place Frank vacationed with Cristi)," without it triggering overwhelming loss, hatred for Frank, and desires to attack him.
- **Resilience memories:** Resilience memories are encoded as we face threats and problems, do our best, and feel stronger and wiser from our efforts. Increasing resilience means we deal better and better with threats—we become more competent with less upset. Emergency room doctors, professional mixed martial artists, and race car drivers encounter incredible dangers and stressors in their

professions, but often relax *more* as conditions become dire. They've developed resilience through training and experience.

I admit I am a neuroscience/social science geek of the first magnitude! If you want a deeper dive into memory, you can go to Appendix 2: *Memory is tricky and central to trauma* where astonishing details of how and why we remember are revealed.

Transforming sensitization-driven traumatic memories into greater resilience is the purpose of all trauma work. *Trauma into Transcendence* could just have easily been titled *Sensitization into Resilience*.

What do you do about trauma?

This book is about resolving trauma in your life and helping others resolve it in theirs. What to do to turn to trauma reactions into resilience? The *very* short version is:

Always connect

When growing through trauma, it's super-beneficial to connect with people who love you, and with whom you can share your experiences. Together we are so much more comfortable and powerful than when we're isolated and disconnected. In some Israeli Emergency Rooms, when survivors of terrorist attacks are admitted, the staff immediately calls their families to come join them, because they've learned that loving community helps mitigate trauma learning.⁷ Frank and Nancy coming to see me and talking about the affair was a huge positive step for them. They were no longer alone in their disaster.

Always accept

Whatever we experience is *ours*, no matter how random, unfair, or catastrophic it is. This includes trauma programming. People mostly understand this idea of radical acceptance and react well to unpleasant events because by nature we're resilient. On the other hand, some traumas seem so unfair—like Frank's affair—or so random—like a car coming out of nowhere and crushing your legs—that we resist acceptance. In the beginning, Nancy's reality was one of outraged

incredulity that this man she'd loved and trusted for so many years could *choose* to hurt her so profoundly. She literally couldn't understand how Frank could do something so damaging to her and the kids. "This should never have happened! If you had only thought *for one second* what the consequences of this would be to our family!" Nancy refused to accept that the man she still loved had hurt her so terribly and had such a major blindspot in his character. She resisted accepting the major work that needed to be done not just by Frank but by her to get through this disaster.

Embody health

Activities that make us feel good about our bodies heal us and deepen us. All therapies, but especially trauma therapies, benefit from enhanced breath, posture, expression, movement, bodily awareness, and artistic expression. Yoga, martial arts, dance, theater—the list is endless, and almost all of it helps us heal from trauma.

Heal collapsed of life stories

When we can't seem to get beyond the distress and handicaps associated with trauma memories intruding in our lives, we can become overwhelmed, depressed, anxious, isolated, pessimistic, physically sick, or cynical about ourselves and others—all reactions that Nancy and Frank were having. My job was to help them through the four stages of trauma work:

1. **The first stage is to face the traumatic material and learn to comfortably share it with caring others.** Usually, this involves grieving losses—like the loss of your pre-trauma life, the loss of innocence, or the loss of living without the burden of trauma induced symptoms of anxiety, rumination, panic, stress illnesses, or suspicion.
2. **The second stage is to grow your life story so post-traumatic growth is embodied in your universe.** The trauma story of being diminished by painful events becomes the resilience story of becoming stronger and wiser through courageous work.

3. **The third stage is to learn to turn negative states of consciousness when you get triggered into positive states of gratitude, presence, optimism, love, connection, awe, or confidence.** This usually involves deliberately generating positive states and practicing them regularly.
4. **The fourth stage is to be the Compassionate Witness and let Wise Self call the shots.** We can look with compassion at ourselves and everything we experience and do. We can connect with our Wise self and let Wise Self call the shots. Wise Self will notice when trauma intrudes and stages 1, 2, or 3 are once again needed.

These stages happen simultaneously in effective trauma work, but there is usually more of an emphasis on one stage or the other at any given moment, and they often progress from 1 through 4 in extended psychotherapy, with lots of three-steps-forward-two-steps-back complications. In the pages ahead we'll expand on each stage, always including practical suggestions for dealing with blocks and problems along the way.

Love heals

One organizing principle of all psychotherapy is that love heals and compassionate understanding is love in action.⁸ My challenge that first session with Frank and Nancy was to share my compassionate understanding to help them begin to contain and dissolve their nightmare realities and wrenching grief for the loss of their past life. As they shared a little compassionate understanding for themselves and each other, it created room to bring some love into all their hurt and anger.

Practical exercises

In each chapter I'll include exercises with journal components and sharing-with-others components. You'll get much more out of this book if you do some of the exercises and share your insights and experiences with caring others—not to mention how they might benefit from your trust and insights. As I explain in more detail in Chapter 6, connection and contribution are powerful tools in integrating trauma.

If you try the exercises, some will feel particularly useful, and those are the ones to continue as regular practices.

Along those lines, if you are a therapist, I've occasionally included therapy tips and exercises to help you use this material in your sessions, and I've gone into more technical detail about certain areas in the Appendices.

Integrally informed psychotherapy

In this book I talk a lot about five sets of perspectives:

1. States of consciousness.
2. Types of people.
3. Observing the world through your inner subjective experience, observing through how your relationships feel between you and others, and observing empirically verifiable data (like direct observation, science, brain scans, and social research).
4. Stages of development—like infant, to toddler, to child, to adolescent, to...
5. Important lines of development like the self-line, the moral line, the psychosexual line, etc. A line of development consists of all the progressive stages we must go through in a particular area to mature in that area, like the moral line of being an egocentric toddler, to caring for family, to caring for your team/group/school, to caring for your country, to caring for all people.

Together these perspectives form the core of the Integral System, created and expanded by Ken Wilber across dozens of books.⁹ I love Ken Wilber and have been transformed by Integral understanding through over twenty years and ten of my own books. In Appendix 1 I have a brief description of the Integral system and apply it to a traumatic episode from my past to show how Integral understanding can help us turn trauma into transcendence. If you find the Integral system appealing, I suggest you read some of Ken Wilber's books. I've found Integral to be

psychoactive—once you learn it deeply, it expands how you experience yourself, others, and the world.

This book is for you!

If you've read this far, this book is for *you!* Trauma affects all of us—ourselves, our relationships, our families, and our cultures. Your curiosity leading to this moment suggests you'd like more power to transform distress into joy and love—more abilities to create happy endings.

This book is also for you if you work with trauma. We live in a rich time clinically, with incredible approaches to dealing with every kind of trauma. All these approaches fit together and complement each other, but no one approach works with everyone, and it's helpful in any system to orient to which of the four stages of trauma treatment is currently up for a particular person. I've found trauma treatment to generally progress through the four stages, and I've found it helps enormously in sessions to know which stage to lean towards.

For change workers and others who want to dig deeper, I've included four Appendices and occasional sidebars for therapists. I've found this material to be priceless to me in my psychotherapy, and I believe you will too.

Journaling is fun

I'll be suggesting exercises in each chapter. It's great to have a journal to use for writing exercises and for recording personal insights. I suggest you get a journal that feels special in some way, with a cool cover and paper that feels good to write on. It helps to choose a time of day or night to dedicate a few minutes to writing about ups, downs, and insights. When you write, you activate different parts of your brain than from when you think, speak, relate, or read, encouraging integration, which brains love!

I'm also asking you to share your entries and experiences with someone you trust. Social isolation is toxic and trauma conditioning tends to

isolate us. We always do better connecting with people we care about, and trauma work always involves connecting with caring others.

*Author's note: To protect the privacy of my clients, all the case examples in this book are conglomerates of people I've worked with over the years.

Chapter 1: What are we talking about here?

Most people are combinations of good habits and bad habits, generous actions and selfish actions, healthy behaviors and unhealthy behaviors, and so on. The more we can have compassionate understanding of the better and worse aspects of ourselves and others, the more choices and possibilities we have in life.

For instance, in interpersonal trauma, the people that hurt us are often channeling some trauma learning from *their* pasts. Reducing Frank to a cartoon villain callously cheating on his wife was not only untrue but inauthentic. Such narcissistic or psychopathic personalities exist, but Frank wasn't one of them. The number one outcome Frank and Nancy wanted was a happy ending for themselves as a couple and a family. Sometimes this is not possible, but in their case it was. 70% of couples dealing with an affair find a way back to a more secure marriage¹⁰, and, if they keep doing the work, to more moments of living happy endings at the beginning of something wonderful.

Frank's small t trauma history with his abusive Father and codependent family, had left him vulnerable to creating Big T traumas in his marriage. His profession of successful CEO provided lots of adulation and admiration that led him to feel entitled to do whatever he wanted. The constant travel offered myriad opportunities to cheat, supported by his what-happens-in-Vegas-stays-in-Vegas business buds.

Nancy was raised by happy parents to be a star. Her family wasn't particularly self-reflective or psychologically sophisticated, but that didn't seem to be a problem. She grew to be beautiful, accomplished,

and interested in personal growth and spiritual development. Frank—charming, successful, and admiring of all her gifts—seemed to be the ideal partner to create a happy family. As almost always is the case in the U.S, the births of their children and the transition into parenthood put enormous stresses on their friendship and love affair.

Nancy had little patience for incompetence and selfishness, and this trait got stronger as she raised the kids. She generally excelled at whatever she did and expected Frank to understand and appreciate her contributions to their shared life, which he did easily in their early romantic years. With children came unexpected challenges. Like most first-time mothers, Nancy was shocked at the demands of infants and small children. She expected Frank to understand that sex wasn't at the top of her list after a long day of demanding children hanging all over her.

The backdrop of their lives was a U.S. culture that often *systemically* generates small t traumas, especially for couples. Examples of current cultural pathologies are:

- Taboos on discussing important subjects (don't talk about sex, race, death, or gender—especially with children).
- Cultural standards of child-centric marriages which neglect the couple and overprotect children from healthy challenges and healthy pain.
- Normalizing jokes about mothers not liking sex and fathers resenting it.
- Insisting, *by law*, on having some of the most miserable sex and relationship education practices for parents and children in the western world.¹¹

The idea of family was sacred to both Nancy and Frank, but they also fancied themselves as secular people who didn't need to pay a lot of attention to the spiritual dimensions of transparency, authenticity, and openness in good relationships. We are diminished when we lie and cheat, and we feel diminished when we are lied to or cheated on. These

are not just psychological injuries; they are spiritual injuries that separate us from our wise selves and core values.

We are wired to be traumatized and to resolve trauma

Almost all of us have had Big T and small t traumas. In one Australian study of hundreds of people in their thirties, each had experienced at least 4 Big T events.¹² Such events influence us profoundly for better (more resilient) or worse (more sensitized). We do better if we integrate trauma and emerge wiser and stronger on the other end—this is what our nervous systems prefer and what happens mostly. I am inspired and reassured that 80% of the time people *naturally* emerge wiser and stronger from Big T traumas, but we don't always! Sometimes we become more sensitized and reactive and need to feel the pain, face the darkness, grieve the losses, and reorient to heal and move towards happy endings.

Big T trauma exercise: *Find a comfortable place to sit with your journal. If you are like two thirds of U.S. adults, you've probably had at least one or two Big T traumas in your life. Remember one of these events as vividly as possible. Imagine yourself there, seeing, feeling, and acting as you did at the time. Write your story about the event in your journal, starting with how you feel in your body right now as you remember. Next, write what happened, who was involved, how you felt at the time (including bodily sensations and intrusive images/thoughts/meanings), how you felt afterwards about yourself and the others involved. Write how you feel now as you remember and write.*

How do you think you have been influenced by this trauma since it happened? Write about this in your journal.

Read what you've written and get a sense for the tone or theme of the trauma story. Is the tone angry, depressed, ashamed, frightened, or resolved? Do unpleasant sensory elements come back—sights, sounds, feelings, tastes, physical sensations—as you remember and write? Do you feel wiser as a result of dealing with this event?

Share what you've written with someone you trust, with the idea of understanding how this event affected you and what work you've done, or will be required to do, so you can feel wiser and stronger as a result of the experience. Write in your journal about the conversation.

Small t trauma exercise: *As you read my descriptions of small t traumas, did any from your past occur to you? Can you recall a small t trauma, or series of small t traumas? Write about them in detail in your journal, including your bodily sensations and meanings at the time and now as you remember. As you write, emphasize how this programming might be affecting you today.*

Share what you've written with someone you trust and then write about the conversation.

Redefining health, trauma, and psychotherapy

People are biased to be healthy and become healthier throughout life. Most of the time we go through a horrible experience like a car wreck or loss of a loved one, and we process the experience within ourselves and with others enough so that we feel fine and not burdened by what happened to us. Most people *don't* develop post-traumatic stress reactions to horrific events. Our brains are wired to stay in the present moment and move forward into the future, and traumatic reactions and associations tend to fade with time. As I mentioned earlier, most of the time we *naturally feel stronger* as a result of our misfortunes.

But sometimes we do suffer from trauma learning. Single event traumas are bad enough. If a tall man assaulted us, we might start feeling overwhelmed around tall men. If a red car smashed into our car, we might begin to find red cars scary. Usually, these single event learnings respond more quickly to treatment than trauma learnings from repetitive childhood, adolescent, or adult events.¹³

Multiple event traumas tend to create worse trauma learning. There is evidence that multiple traumas can degrade our capacities to integrate and grow. They can injure the brain so that the frontal cortex is less self-

aware and self-regulating, and the limbic area becomes hypersensitive to triggers. Repetitive traumas can cause the sensory cortex in the occipital lobe (at the back of our head) to privilege and amplify threatening sensory inputs, be hyper-alert for stressors, and quick to cue alarm/panic/rage/shame/numbness from our limbic area's amygdala. All this serves to keep the stress response regularly firing unnecessarily—extremely costly metabolically to the entire body, and degrading our emotional, cardiovascular, metabolic, and immunological systems.¹⁴

Life is managing processes

Life is managing multiple interior and relational *processes*. Emotions, sensations, thoughts, memories, love affairs, friendships, responsibilities, obligations, and family relationships are all experienced by us as ongoing processes that we handle moment to moment.

Triumphs and hardships, victories and defeats, emerge from these processes as we navigate our lives. Some of us have more than our share of obstacles like hurricanes, cultural upheavals, or abusive parents. Some of us have inherited vulnerabilities like shyness or tendencies to be anxious, hyperemotional, suspicious, distractable, or compulsive. No matter how we're programmed, Big T and little t traumas are ubiquitous in human existence, and they affect the processes of our lives and relationships.

If we manage life processes well, we *grow*. Growth is becoming wiser, stronger, and more resilient. Growth is changing some of our behaviors to fit new understandings. We don't exactly heal psycho/spiritual/social wounds as much as *grow through them*.

This developmental/growth-oriented approach reflects the emerging 21st century departure from the 20th century disease model of mental illness—where we, "Suffer from depression," seek, "Treatment," so that we can be "Cured."

Harriet, a woman in her late thirties, came to me two months after her grandmother died. Harriet had been raised by her grandmother, who was

unfailingly wonderful and wise with her, and Harriet was shocked by the intensity of her grief.

I asked her what was going on, and she replied, “People have died before, and I’ve been sad, but I’ve never felt this horrible! I can’t eat, I wake up crying thinking about Grandmum. I don’t feel like I’m getting over it. Am I clinically depressed?”

I hear “Am I clinically depressed?” regularly, and it’s a charged question. The subtext is often, “Should I take antidepressants?” I have a lot of strong opinions, based on my clinical experiences and the latest research, about both these questions. Let’s look at them one at a time:

“Am I clinically depressed”

First of all, depression is a normal human reaction to chronic stress, Big T and little t traumas, and overwhelming life problems. We all get bummed out, pessimistic, and even despairing on occasion, and sometimes it hangs like a pall over us for days, weeks, or even months. Generally, discussing your distress with caring others and organizing your life to be more self-nurturing and healthier in multiple dimensions not only resolves depression, but results in enhanced growth, intimacy, and vitality. I told Harriet, “Depression is part of grief, along with denial, bargaining, anger, and acceptance. Your grandmum *deserves* your grief! She was a wonderful, secure foundation for you all your life, and her death is a catastrophic loss. As you increase self-care, and allow all the stages of grief, your unconscious will eventually integrate her death into this new world without her. You’ll feel more accepting and less burdened by this new world with her not in it.”

All this was relaxing to Harriet. After our session, she did connect more with family and friends, and focused on exercising regularly and eating healthier foods. When the grief stages welled up, she allowed the experiences without getting lost in them. Eventually she could think and speak about her grandmother’s death without much sadness and with lots of gratitude and love. She had accepted the responsibility of better

managing the current processes in her life with the goal of resolving her grief into post-traumatic growth.

When we can *allow* painful feelings and meanings, and cultivate *compassionate understanding* of painful events, our unconscious selves are hard-wired to integrate and grow. This is especially true of grief, our natural reaction to losses of all kinds. As people engage in the first stage of integrating trauma—facing painful memories and distressing sensitizations—they often need to grieve the losses that are always involved.

Should I take antidepressants?

I am not a medical doctor and don't officially give medical advice. If you are considering taking antidepressants or going off antidepressants, talk to your doctor about it.

That being said, I think the current understanding of depression and anxiety has been overly influenced by pharmaceutical companies who are major contributors to medical schools and drug research. The U.S. is only one of two countries who allow pharmaceutical companies the rights to engage in shameless advertising for their over-priced products, and their billions of dollars spent on lobbying, political contributions, and advertising have given them a monopolistic stranglehold on the U.S. health system.

In my reading of the research, the current crop of antidepressants—the serotonin drugs especially—create many more problems than they solve and are horribly over-prescribed. 10% of the U.S. populace, and 22% of women from 25 to 45 are taking these drugs, which are barely more effective than placebos, and significantly *less* effective than regular exercise for alleviating depression. Even worse, if you are depressed and take one of the serotonin-boosting drugs, you are twice as likely to develop depression in the future compared to depressed people who found other ways through depression. Add the side effects of diminished libido, difficulty with orgasms, weight gain, and such painful discontinuation effects that some people never stop taking the drugs

even when want to, and it's hard to imagine anyone choosing medication unless they are completely immobilized by overwhelming suicidal despair. ¹⁵ Finally, even as the numbers of people on these drugs have skyrocketed, rates of depression and anxiety in the U.S. have doubled and tripled in the forty plus years they've been around. These statistics suggest that such medications are less of an answer to the problem than a part of the problem.

Psychotropic medications *can* be life saving

Some people are so immobilized by depression or anxiety that they are only willing to take a pill, and some who take the meds credit the effects for getting them on their feet again. Many of my clients over the years have believed the antidepressants they took were important components of recovering from depression, obsessive compulsive problems, anxiety, and post-traumatic stress reactions.

I'm especially a fan of lithium and other mood stabilizers for people who are bipolar—meaning they can enter disruptive agitated states of grandiosity or black despair, amped intensity, and social disconnection (manic or hypomanic states) for weeks at a time and who often also suffer from depression. I currently won't take a diagnosed bipolar person into treatment if they refuse to take any of the mood stabilizing medications (which are different chemicals than the antidepressants).

We are still an overmedicated nation

With the above caveats in mind, we are still in a crisis of overmedication in the U.S. If Harriet had gone to her M.D, or a psychiatrist, the current standard of care would be to take her depression seriously (always a good idea) and, if she was the least bit interested or had been influenced by pharmaceutical companies' ubiquitous advertising, prescribe one or more antidepressant drugs (often a bad idea). This quick-to-medicate consciousness is a cultural pathology in the U.S. in which rates of depression and anxiety are doubling with each generation, even as more and more Americans are put on these drugs. I thought Harriet was better served to be encouraged to embrace her grief, commit to a healthier lifestyle, and connect more with family, friends, and practitioners.

Medication could always be considered later if her lifestyle choices didn't deliver relief.

We are responsible for everything we experience and do

All of us are responsible for our own experience and how we manage the multiple processes of our lives. If we neglect *any one dimension* (like our bodies, work, trauma programming, relationships, or values), we become less healthy and even sick in that area until we do what it takes to become healthier. As we become healthier, we also become wiser, and more mature—we *transcend* our old selves into new selves who *include* who we've been, but who have become *more* than who we were before.

If we cultivate compassionate self-awareness and courageous actions, we can choose to grow happier, better connected, and generally more beautiful, good, and true. Relationally, we can become more able to give and receive love, more expert at handling and relating, and much better at choosing and cultivating healthy relationships. If we keep doing the work, we eventually find ourselves living a happy ending at the beginning of something wonderful.

Stages of healing

What's not widely understood about trauma is the fact that addressing/healing/integrating trauma tends to proceed through stages, with different challenges and tasks at each stage. For instance, when initially dealing with trauma it is important to learn to effectively self-soothe, identify the symptoms, allow the feelings, and *focus on* traumatic memories/meanings while maintaining tolerable levels of emotional arousal. In later stages of trauma treatment, the agenda is often to notice the beginning of a trauma trigger and *focus away* from the traumatic events/meanings onto other, more positive memories, images, and states. Such differences can be confusing for clients and therapists who don't understand stages of recovery and integration.

Transforming sensitization into resilience involves literally changing the emotional charges and existential meanings of trauma from self-denying

and self-denigrating to self-affirming and self-enhancing, and the healing journey proceeds through different stages with different people.

Four stages of trauma work

What I've noticed in treating trauma since 1973 is that trauma work tends to progress through at least four major stages, with each stage having different principles, demands, and goals. As I mentioned in the introduction, all the stages are relevant throughout treatment, but any given session tends to emphasize one or another stage, and people tend to progress from stage 1 through stage 4. Briefly, these four stages are:

Stage 1: Face trauma. Just remembering, acknowledging, and talking about traumatic experiences or conditions can be shockingly difficult. Like Nancy and her hypersensitivity to affair references, people triggered into trauma memories can experience surges of terror, rage, anxiety, shame, and blanked out dissociation (Frank's initial response to Nancy's rage). They can become lost in painful distorted self-judgments (like, "I am stained forever by my rape/molest/assault/loss/horrible family"). They can feel isolated from man and God—walking through the world thinking, "No one could possibly understand or hear about what I'm going through."

Telling the stories to a caring other without getting lost in the stories is often an overwhelming challenge. This usually requires normalizing and supporting grief, and we'll talk much more about grieving losses in future chapters. Therapy or survivor groups can often provide safe containers for people to tell their stories, but not always. Being able to discuss the material is such a major milestone that Freud originally believed that talking comfortably about a previous trauma signified a "cure."¹⁶ Sometimes this is true, but often more is required. With Harriet, allowing her grief and learning how to discuss her grandmother's death without undue distress was enough for her to feel resolved and wiser. She required no help from me to naturally move to the next level or resolution—turning her story of wrenching loss into one of loving gratitude for the gift of her Grandmum. With Nancy, who had to grieve her previous I'll-never-be-betrayed life and build a satisfying

relationship with a man she both loved and hated intensely, much more work was required.

Often a necessary step in facing trauma is literally healing an injured brain. Especially with childhood developmental trauma (usually caused by repetitive emotional, sexual, and/or physical injuries or neglect occurring within the family), brain regions associated with attention, self-awareness, memory, and affect regulation can be compromised.¹⁷ I often suggest neurofeedback to help light up and rewire necessary neural circuits. Neurofeedback can often help people to think, react, remember, relate, and feel effectively enough to open up to intimacy and healing. Other approaches that show promise in healing injured brains are EMDR, brain spotting, energy medicine, spiritual practices, and Virtual Reality reenactments. I'll talk more about some of these approaches in future chapters.

A universal key to facing trauma is learning dual focus attention on trauma learning. Dual focus is experiencing yourself in the safe present moment, while also focusing on the feelings, images, memories, and meanings of traumatic events and programming. One way or another, every approach to resolving trauma employs some form of dual focus.¹⁸

Stage 2: Grow your life story. Once we can consider traumatic events and meanings without becoming overwhelmed and have grieved the losses involved, distressing experiences need to feel more like sources of wisdom and love than injury and shame. A traumatic event is what it was, but the *meaning* of the experience changes over time, and we can powerfully affect the meanings of all experiences.

Joseph Campbell popularized the universality of life-as-hero's-journey in his seminal book, *Hero with a Thousand Faces*. The Hero's journey progresses through stages which mirror the stages of trauma healing. We are challenged or called by someone or something (often a trauma) and we're pulled to say yes to the call, face the obstacles, meet the challenges, and be transformed by our struggles. If we say yes to the call and do the work, we ultimately emerge more whole from the experience

—more able to give and receive love. The Hero’s Journey finds meaning, purpose, identity, and community in trauma and crises as well as in triumphs and successes. In the beginning of the last century, Pierre Janet, one of the first trauma specialists, believed that psychologically finishing a traumatic event into a subjective sense of triumph was curative¹⁹, but there is often work on existential dimensions of the new narrative that is necessary. To feel fully resolved, many require a sense of expanded personal meaning and of spiritual connectedness. We will explore the Hero’s journey in more depth in Chapter 3.

Sometimes facing the trauma and embodying a new autobiographical narrative is enough to feel resolved about trauma. This was definitely true for Harriet, frightened by the intensity of her grief over her grandmother’s death, but ultimately accepting as she learned to patiently allow her grief to progress. On the other hand, with many people plagued by trauma restimulations (especially complex trauma involving repetitive childhood events), embodying a new narrative is not enough to feel healed. Nancy was one of those people who needed more than facing trauma and having a new narrative about herself and her marriage. Even as she learned to love and trust Frank again, she had developed habits of rumination on the betrayal, with compulsions to engage in the same tired attacks on Frank when she was triggered. Nancy needed stage 3.

Stage 3: Change habits of attention from negative to positive.

Sometimes we can tell the trauma story without getting lost and understand the trauma as part of our own hero’s journey, but still get triggered into shame/anger/fear/distress reactions. When past experiences—implicit memories, explicit memories, and traumatic restimulations—or habits of negative association and obsession intrude, they tend to create unwanted painful states that distract us from the present moment. If we have processed memories and meanings to the point of self-acceptance and a positive narrative, then further problems with them often reflect *habits* of obsessive thoughts, images, and meanings, and *habits* of compulsive destructive actions leading to unnecessary suffering. In other words, you can tell the trauma story

without getting lost in it, you have a positive coherent autobiographical story that includes the trauma, but still can be too easily triggered into painful emotional/somatic/relational states. This can have less to do with trauma and more to do with *negative habits* of consciousness—habits of obsession and reaction. This was true for Nancy many months into our treatment. She had developed a destructive habit of responding to any positive action on Frank’s part with remembering the affair, feeling angry, and attacking him. Her work at that point was to notice the beginning of the trigger-distress-memory-attack sequence, and to turn towards gratitude and love for Frank’s positive actions and deeper commitment to her and the kids, with no focus at all on the affair. We’ll talk about effective methods of directing attention to create better states in Chapter 4.

Spiritual dimensions: A lack of resolution after being able to face trauma and feel a more positive life story can come from the lack of a felt sense of spirituality. Humans are genetically hard-wired to hunger for spiritual communion with others, nature, and the universe (often including a felt sense of mystical connectedness of all beings)²⁰. In such cases we can choose to direct our attention to Spirit without focusing on any specific trauma. We can develop our spiritual cores. I suggest several effective ways of doing this in Chapters 4, 5, and 6.

Cognitive Behavioral Therapy (CBT)

We can cultivate memories/images/intentions/beliefs that evoke pleasurable states of feeling loved, held, guided, and never alone. This redirection of attention is the central process in Cognitive Behavioral Therapy’s (CBT’s) exposure and response prevention (ERP), and is used to address negative thoughts, obsessive compulsive disorder (OCD), phobias, and painful habits of consciousness. The process at this stage becomes:

- Notice the bad habit as it occurs.
- Refuse to indulge the focus on painful feelings/meanings and refuse to engage in destructive behaviors.
- Focus instead on more honest, positive, and life affirming memories/images/actions yielding preferable states and actions A

crucial part of this work is noticing your deliberate shift to a more positive state in the present moment and congratulating yourself for this successful effort.

These notice-triggers-and-turn-to-preferable-states practices create better habits of consciousness which, through repetition, eventually include and transcend old bad habits. Activating these more complex and healthy neuronetworks by focusing on preferable thoughts and behaviors causes the brain to myelinate and strengthen the new circuits, leading to progressively more effortless healthy thoughts and actions. This is often effective in completely turning trauma into transcendence, but sometimes not, which leads us to stage 4 of healing from trauma.

Stage 4: Be the Compassionate Witness and let Wise Self call the shots

All psychotherapies and contemplative systems encourage compassionate self-observation—developing the Witness. You can observe yourself navigating your life in the present moment with interest and acceptance, rather than with shame, dissociation, or critical self-judgment. This part of you that can observe you, others, and the world with compassion and acceptance is your Witness. Compassionate understanding of you, others, and the world right now is healing in itself, but also provides access to your interior Wise Self. Throughout this book I will refer to the Witness, the Wise Self, and compassionate understanding as all indicating the same interior processes. In traditional psychology, this is called the observing ego. The Witness is especially relevant in our multiple relationships with others, both intimate and non-intimate, because everything is relationships, and social referencing and self-correction to more pro-social is central to happiness, health, and success.²¹

In a session with Nancy, she was wondering whether she should divorce Frank, and began (again) to recite lists of his lies and shortcomings. I asked her, “What does your Wise Self say?”

Nancy was a deep woman—she had done a lot of transformational work and was willing to look at both her strengths and weaknesses. She took a deep breath and her expression became thoughtful, more relaxed, and softer. She smiled ruefully. “My Wise Self says we need to work it out, and that I need to learn to not obsess on his betrayal and to stop attacking Frank.” In that moment Nancy got what she needed—inner guidance to keep working Stage 3 until she and Frank could have the love that both of them desperately wanted.

Your Wise Self can see the trauma reactions that life events occasionally trigger, no matter how much emotional/spiritual work you’ve done. This is the human condition—we will never be completely free of trauma restimulations. The first three steps of trauma treatment often yield satisfying relief and post traumatic growth to happy endings, but not always, and not necessarily permanently.

In psychotherapy, when stages 1, 2, and 3 leave someone still feeling in some toxic grip, it’s often useful to look deeper. Sometimes there are problematic relationships that need healing attention. Sometimes there are destructive personality traits and bad habits that existed before traumas. These mostly respond well to using the four stages as a personal growth paradigm, very much like Alcoholics Anonymous uses their 12-step program as a recipe for a good life. Sometimes when symptoms/problems persist, it’s beneficial to revisit traumatic memories/feelings/beliefs looking for what might still be resisted, what might have been missed, or what distortions are still being clung to. New distressed and twisted trauma memories might need to be recognized, healed, and integrated. Also, since trauma learning was originally programmed as solutions to problems, new problems that arise in our lives can cue these old solutions, requiring us to return to the first three stages of trauma world to create less sensitization, more resilience, and better solutions.

Lack of satisfying resolutions or the continuing intrusion of new trauma reactions can also point towards:

- Further traumatic memories and/or compromised neural processing that need attention via stage #1.

- Self-destructive meanings—distortions or dissociated parts of our autobiographical narrative—that need to be addressed and integrated via stage #2. This was true for Nancy who felt permanently stained by Frank’s affair, and for Frank who felt fundamentally flawed as a man because of his betrayal.
- Lack of satisfying resolutions can come from self-destructive habits of consciousness that need focused attention to be included and transcended into new habits via stage #3. This was true of Frank’s habit of dissociating and spacing out when Nancy or their kids were angry at him. He eventually learned to catch the first feelings of spaciness and to direct himself to be fully present in the moment.
- Physiological problem like hormone imbalances, sleep deprivation, brain injuries, or lack of exercise can all compromise resolution of trauma. Luckily, almost all physiological problems respond well to caring attention and healing actions.
- Destructive character traits can block resolution of trauma. For instance, a narcissistic trait of continually focusing on your image at the cost of your deeper self makes it enormously hard to activate a compassionate Witness or Wise Self who empathizes with others. The skills of self-reflection, mutuality, and empathy are too stunted by the narcissist’s total investment in inflating self-image at all costs. This is true for other trait disorders like paranoid personality disorder, obsessive compulsive personality disorder, and anti-social personality disorder.²² In these cases, the therapeutic task is to help clients develop empathy, compassionate self-awareness, and self-regulation, so they can grow to be *able* to engage in the four stages of trauma work. I expand on some of this material in Appendices 3 and 4.
- A lack of resolution might reflect a need to embrace a new self-identity, for instance changing from self-identifying as a damaged person, to self-identifying as a good partner who has learned through hard work how to love and be loved well. Personal work can take us to the threshold of a new sense of

self, but we often need to consciously step through that threshold and embrace a new, larger *me*. This is beautiful to watch when it happens. Frank and Nancy two years after the affair had a different, wiser, more mature sense of who they were and what their marriage was about. Frank would literally say in latter sessions, “I’m a different guy.” Nancy came to see the affair as a crucible that transformed her marriage with Frank and required both of them as individuals to grow into new levels of commitment and intimacy.

- A lack of resolution can reflect current problematic relationships or relationship tendencies that are maladaptive now, and often existed before trauma learning took place.

However it plays out with each unique client, transforming traumatic memories into resilience, and working confidently with all four stages are useful organizing principles in trauma work.

Six core practices

What are some universal practices that help each stage? Clinical wisdom and scientific discoveries about human thriving show us that with each stage we should:

1. Practice dual focus—present and safe in the here-and-now while also in touch with the feelings, memories, and meanings from the past.
2. Support self-love and radical self-acceptance.
3. Support healthy empathic connections with caring others.
4. Accelerate physical/relational/emotional/moral development—sometimes including healing damaged brains.
5. Normalize and become more expert in trauma processing—especially understanding and normalizing the different stages of trauma work.

6. Grow our unconscious self to support all of us—you, me, and *everybody*. Our unconscious selves are genius! They constantly take in data from our inner and outer worlds and guide us in life with memories, stories, feelings, and impulses. Neuroscientists call this our adaptive unconscious,²³ and I call it our Shadow-self.²⁴ As we grow, our Shadow-self grows, giving us fewer destructive states and more healthy responses to the present moment.

As you read this book and engage in the exercises, you'll find yourself expanding your capacities in these six core practices.

Exercise: I suggest you find a comfortable place to sit with your journal:

- *Write, "How do I hope to transform through reading this book? What is that future version of me like?"*
- *Read your handwritten version of these two questions five times. As you do this, thoughts, feelings, images, memories, and stories will arise. Some will have a slightly more intense positive or negative emotional charge. Write about these as you notice them, creating the sense and story of your future more evolved self.*
- *Share what you've written with someone you trust and then write about the ensuing conversation.*
- *What are two to five words that describe this transformed you? Wiser? More joyful? Focused? Kinder? More loving? Intentions are powerful! Write those words in bold letters.*
- *Look at the words, cultivating the feeling of being each one. The five I use every morning are, "I am love. I am joy. I am wisdom. I am humor. I am courage." As I do this practice, I feel each of these*

qualities flow through me. As you do your practice, “I am ___, I am ___, I am ___” feel those qualities suffuse your mind and body.

- *Do this every day for a week, and then write about any insight or benefit that you associate with doing it.*

Therapist exercise: *Trauma work (as well as most other psychotherapy) almost always involves the four stages, with one or another more prominent in most sessions. Just asking yourself (and sometimes asking your client), “I wonder which stage is most up right now?” delivers huge amounts of information and guidance to therapists.*

Over the next week, ask yourself during sessions with your clients, “Are any of the four stages more relevant right now? Are we working at facing trauma or unpleasant truths? Are we exploring a more uplifting and heroic personal story? Are we focusing on cultivating better states and turning away from more toxic states? Are we focusing on compassionate understanding and self-observation—especially in relationships with others? Write each evening for two or more minutes about what was revealed by asking and answering this question during one or more of your sessions.

After a week of entries, share what you’ve written with a therapist, friend, or supervisor. Afterwards write in your journal whether it was a fun conversation and what made it fun. If not, why wasn’t it? Fun is an underappreciated experience! We therapists often pay more attention to painful affects like fear and shame, and not enough to pleasurable affects like fun, joy, or triumph. In general, we want therapy to be enjoyable for us and our clients as much as possible.

Chapter 2: The First Stage: Facing trauma

Facing trauma begins with recognizing that a bad habit learned from previous pain needs healing attention.

For Nancy and Frank, this meant facing horrible new habits. Because of Nancy's discovery of Frank's affair, both were trapped in states of fear and rage, in stories of betrayal and loss, and in impulses to attack and shut down. They felt at sea in a storm of agonized loss that just seemed to get worse the more they tried to deal with it alone or together. They felt overwhelmed, and so reached out to me for help.

For Harriet, facing trauma was recognizing that just waiting out the pain of her grandmother's death—a strategy that had worked well with previous losses—wasn't working with this grief. If anything, she was feeling *worse* as the days and weeks progressed. This sensitization process, more reaction coming from milder triggers (like breaking into uncontrollable sobs just hearing a fragment of a song her grandmother had loved), was terrifying enough that she called me for an appointment. "Am I going crazy?" Harriet asked me in our first session, hoping I'd say "No," but also hoping she had some condition that could be treated before the grief completely consumed her.

Any time we have a disproportionate emotional reaction—like screaming at the telemarketer, grounding our daughter for a month instead of a Friday night, or completely blanking out when asked a question at an important meeting—there's a good chance that we are enacting some trauma learning that has sensitized us.

Burt was a 35-year-old guy who came to me because he could never stay with a lover for more than a year—sometimes months—before getting sick of her and needing to break up. At first, he thought he was choosing the wrong kind of women, but it turned out he was choosing smart, attractive, educated, caring women. "I don't know what it is!" He told me. "In the beginning I think she's great, and it's all romantic weekends and cooking together after work. Eventually though, she starts getting on my nerves, until finally I can't stand her!"

Burt got that he was programmed to leave, but couldn't understand why, or what to do when he began to be repulsed instead of attracted. Since he was at the "I've got to get out of here!" stage with his current lover,

Laurie, we started with inquiring into the physical and emotional reactions he was having around Laurie, and when he had felt them before. Not surprisingly, Burt had a mother who was persistently critical and intensely controlling—causing Burt repetitive small t traumas of rejection and constraint. As a child Burt found relief by going to friends' houses, joining lots of school clubs and teams, and finally leaving home at seventeen to fend for himself. Whenever a relationship passed out of intense romantic infatuation and began to move into the more family-of-origin feelings of intimate bonding, Burt was easily triggered by minor mistakes or imperfections in his lover into panicky and irritated feelings driven by distorted stories of being controlled and trapped. He had a habit of talking himself out of a relationship when these feelings started arising—a great strategy with his extra crazy mother and a curse with the healthy women he was dating. He needed a new habit of facing his trauma learning. He struggled to understand how closeness without romantic obsession felt too much like being back with Mom to his adaptive unconscious—his Shadow-self. The flight defense of “I’ve got to be free!” overwhelmed him at these moments.

Burt needed to discover that love wasn't just about finding the right woman. He needed to grow to *be able* to be with the right woman past romantic infatuation. Facing his negative reactions as trauma learning was an important step towards deciding to stay and work on improving an otherwise good relationship with Laurie.

Many of us have trauma learning like Burt's which interacts with our core personality to compromise important parts of our lives. Facing trauma means acknowledging that we have a problem with bad habits and trauma restimulations and need to ask for and receive some help and guidance to resolve them.

People are often amazingly reluctant to face trauma learning. Our Shadow-self not only dislikes pain and injury, but fears pain and injury and often fears change itself. This fear cues defensive maneuvers when trauma memories are triggered; maneuvers like drinking, drugs, compulsive sex, denial, eating disorders, or toxic relationship patterns

like nasty fights and blaming/shaming conversations (or bailing as with Burt). Fear of facing trauma can also lead to refusing to ask anyone for help or refusing to go to therapists or other change workers. Sometimes people develop neophobia—fear of newness—and try to avoid pain by isolating themselves and only engaging in familiar activities, never risking anything new and potentially uncomfortable. All these problems can be guides to trauma learning *if we face them*. We can find the bad habits and use them to develop new strengths.

Exercise: How do I resist facing trauma?

Why is facing trauma so hard sometimes? What does that resistance feel like? Let's try to experience that felt resistance right now! Is there some memory you tend to avoid or push away? A squirmy embarrassing event? A time you acted badly? A terror moment? A horrible experience? A part of your history you're ashamed of, frightened by, or disgusted with?

Give this memory a little attention right now and check out how you feel. What sensations are you having in your body? How deep or shallow is your breathing? What emotions do you associate these sensations with? Is there a critical judgement you have about yourself embedded these feelings? Is this critical judgement the most compassionate understanding of you? Can you feel any reluctance or resistance to doing this exercise?

Write about these physical reactions and critical judgments in your journal.

Share what you've written with someone you trust.

If you felt some distress or resistance to focusing on the memory, you've had a taste (or more than a taste!) of unconscious reluctance to face destructive Shadow. Remember this taste! It can guide you to deeper understandings of yourself and others. It can be a cue to initiate the first stage of trauma treatment.

Our unconscious often wants to avoid painful feelings and meanings using defenses like repression, denial, and projection, but our unconscious also wants us to integrate all experience into more beauty and strength. Our Shadow-selves, our adaptive unconscious selves, simultaneously generate traumatic memories craving integration, while instinctively avoiding (defending against) the feelings and meanings as they arise. In the first stage of trauma work, we look at all this with dual focus—we face the experiences but keep emotional arousal levels even enough to feel safe in the present moment, usually connected to an understanding other.

Continuing integration generally requires feeling the dual focus process of experiencing traumatic episodes and conditioning without becoming lost in the feelings and beliefs. Are you able to consider your difficult memory without becoming lost in the experience?

Here's my experience as I consider a past traumatic event: I remember three young men chasing twenty-three-year-old me through the rainy streets of Crescent City California at 9:00 pm on a Friday night in December of 1973. I feel fear and anger in my chest at this moment and see the image of them attacking me as I turn and run towards the lighted Denny's Restaurant across the street. As I focus on the image, the fear strengthens. Those guys wanted to hurt me badly! I'm now remembering how I dealt with that situation and I'm feeling calmer. I made it to the Denny's and enlisted the aid of strangers to eventually outmaneuver the three guys so that I got out of town uninjured. And now I'm back here with you. At this moment I feel proud of how twenty-three-year-old me handled that night. I feel a sense of triumph and strength in my chest.

I did *not* feel pride and triumph for a long time after that night. I felt shame at being in the situation, shame at allowing the verbal abuse ("You fucking hippy!"), and shame at not using my martial arts skills to fight the men. I felt sickened by the remembered smell of my burning hair as one of the guys walked past me seated with a kind couple at the Denny's and stuck a lighted cigarette into my long hair. I did seek out a therapist to face the trauma conditioning, and over time I could

remember and discuss the incident without my heart racing and my legs feeling weak. As I progressed through that first stage of facing and talking about the event and the meanings while anchored in the safety of my therapist's office, I naturally flowed into the second stage of changing my story of the event from Keith being diminished to Keith being strengthened.

The first stage of facing trauma involves recognizing we have a problem associated with trauma learning and talking with a caring person about it. If we *resist* discussion, or even *can't* talk about something without overwhelming distress, there's almost certainly trauma learning involved that would benefit from one of the stages of trauma work.

Therapist sidebar on play therapy and dual focus: *We therapists really like helping people! That's why we got into this work! Good therapists have a lot in common—we are empathic, caring, and genuinely interested—but we are also different in that we each have a unique natural healing style. Part of my style is to stay present and be playful whenever possible, even as I descend with my clients into trauma learning. I've found this helpful in keeping my client's attention both present with us together while also emotionally connecting to traumatic events or people. I've had countless sessions laughing uproariously with my clients at the idiots and immature abusers she or he had to deal with. Healing trauma doesn't have to be serious all the time!*

Trauma learning can be terrifying—having extreme emotional reactions to apparently trivial triggers (a mark of sensitization) can cause a lot of anxiety and self-doubt. Specific trauma memories can be scary, infuriating, or icky. I like to laugh with my clients whenever possible. The more fun we have, the easier it becomes to sustain dual focus to face traumas, grow the stories, and feel good. Believing in my client's power to create happy endings relaxes and guides me like a light in the dark, like a compass in a snowstorm.

Dual focus and humor are also useful in distorted non-traumatic memories. In an individual session with Frank after Nancy discovered

his affair, I asked him how the whole Cristi debacle occurred. He told me about meeting her at a party at the yoga studio and being in awe of her beauty. His story was that he, an intelligent guy, was initially simply engaged in friendly conversation. “I wasn’t hitting on her,” he told me, “We just enjoyed each other’s company.”

I laughed a little and responded “Come on Frank! Being in awe of her beauty and seeking her out is fully hitting on her.” Frank looked sheepishly down at the floor. “I guess you’re right,” he said, “But she was the one who started the romantic part.” As I raised my eyebrows at this, Frank laughed himself, “All right! I was hitting on her and didn’t think a woman that spectacular would ever be interested in me.”

I looked into his eyes, “In my book, 100 Reasons to Not have a Secret Affair (available on my website, drkeithwitt.com), I have a whole chapter on the theory of loopholes. I’ve found that, if you have any loopholes in your monogamy commitment, at some point you’ll find a way to cheat. This is why 25% to 40% of married men cheat, and 15% to 25% of married women cheat at some point.²⁵ Your loophole was, ‘If she is spectacularly beautiful and wants me, I say yes.’” Frank nodded and looked down. He got it.

In this I was being playful but pointed. The message was clearly, “Don’t bullshit me, Nancy, or yourself.” This was a necessary step for Frank because any defensiveness or denial of responsibility around Nancy drove her into paroxysms of rage (one reason Frank and I were having an individual session). She was so sensitized that she couldn’t watch a TV show with cheating in it, much less listen to Frank’s weak rationalizations, without going through the roof. Meanwhile, Frank was learning that recognizing and laughing at his own blindspots from the perspective of a Wise Self in the present moment (dual focus) made change more accessible and comfortable. He could more easily accept the magnitude of his betrayal and feel the shame without getting lost in it.

What if I can’t talk about it?

Occasionally a memory, feeling, or part of our history is so painful we can't focus on it without shutting down or falling to pieces. This is especially true when we've had repetitive betrayals, rejections, or intrusions as children—which can warp our development and damage our brains. That's right! Sexual betrayals can interfere with the reasoning centered in the self-observing frontal cortex, physical abuse can damage the memory center hippocampus, emotional abuse...—you get the idea.²⁶

Luckily, we have neuroplasticity—our brains have abilities to heal and change throughout our lifespan in response to the states and meanings we activate consciously and unconsciously. Some treatments address neural programming directly. For instance:

- Mindfulness practices support self-regulatory circuits between the frontal cortex and emotional circuits in the limbic midbrain. These circuits also support the Witness or Wise Self. Almost any regular mindfulness practice has this effect, and my clients have benefitted from a wide variety of practices, some of which are included in this book.²⁷ That being said, mindfulness practices are not for everyone. In several studies, 8% of the subjects found the mindfulness techniques to be distressing and even traumatic.²⁸ If you have that kind of reaction to a mindfulness system, talk to a caring therapist about your experiences. There are gentle onramps to mindfulness that most therapists use to help clients develop compassionate self-observation.
- Recent psychedelic research using ketamine, psilocybin (from magic mushrooms), MDMA (ecstasy is the street name), and DMT (a substance harvested from certain toad secretions), have demonstrated that many people respond positively to guided psychedelic experiences designed to shift trauma memories into resilience memories.²⁹ People are interviewed by trained facilitators, set their intentions, take the drug once or more while being guided, and then process their experiences afterwards with facilitators or other therapists. I've occasionally had sessions with clients one or two days after their psychedelic treatments, and I've enjoyed helping them process and expand on experiences, insights,

images, stories, memories, and whatever else happened during the trip.

- Neurofeedback has shown great promise in rewiring damaged brains. A cap with twenty electrodes is put on someone's head while they watch a screen and listen through headphones. The neurofeedback therapist charts the client's brain waves and provides input via the screen and headphones that creates a literal dialogue between the audio/video and the client's brain. The therapist then adjusts the outputs to encourage the brain to have healthy EEG profiles. Over time these sessions can result in new circuits and self-regulatory skills being *hard wired* into people's nervous systems. These new circuits can enable trauma survivors to stay present while discussing horrific events and devastating feelings.³⁰
- Energy medicine is a field where people learn to use their minds and behaviors to change the energies of their bodies. For instance, EFT—Emotional Freedom Technique—uses light tapping of certain areas (like eyebrows, chin, sternum, collar bones, and hands) to calm stressed nervous systems and support resilience.³¹ I occasionally teach this to clients to self-soothe when they get too jacked up or shut down. Dual focus can then happen, alternating from self-soothing to a few seconds focusing on distressing memories, back to self-soothing, and then back to a few seconds focusing on the memories, and so on. Many approaches to trauma treatment—especially Peter Levine's Somatic Experiencing approach—use this pendulating back and forth process.³²
- EMDR—eye movement desensitization reprocessing—encourages people to remember traumatic events while being stimulated bilaterally with moving fingers, objects, sounds, or touch.³³ The bilateral stimulation calms the brain and activates memory areas in the hippocampus and thalamus so that the trauma memories can be reconsolidated into less distressing meanings. Over time, the negative emotional charge and self-critical interpretations of the events can dramatically fade using this treatment. I find EMDR quite useful with my clients—especially when we dive into specific rapes, molests, assaults, catastrophes, or betrayals. As the

emotional charge associated with the trauma memories goes down, the opportunities for transcendence go up.

- Effective psychotherapy helps brains be healthier, especially in trauma-induced sensitization circuits.

We didn't always have these resources. In the early 1980s I worked with a woman named Ellen, a young mother who had suffered repetitive abuse throughout her childhood from her sadistic father. She had surges of intense emotional pain, struggled with compulsions to self-mutilate, and was barely present for her husband and two young children. She became obsessed with what she believed were additional events of which she had no conscious memories and desperately wanted more clarity about. I tried a variety of approaches to help her regulate, remember, and heal, and one time suggested hypnosis to go deeper into her childhood ("Probably not a good idea!" my current 2023 therapist self is saying to my 1987 therapist self). While she was in trance, I asked, "What's happening, Ellen?" She replied, "Ellen isn't here." I felt a cold shiver down my spine as I heard this, and spent the rest of the session gently bringing Ellen back to the present moment.

Since then, I've learned a lot about dissociative identity disorder (multiple personality disorder) and interpersonal neurobiology. I wish I could have referred Ellen to neurofeedback! In retrospect, she needed hard wired self-soothing skills before we dove deeper into the mud of her abuse. Today I'd suspect her brain was injured by her trauma history interacting with her personality traits and would focus much more on finding the injury, healing her brain, and growing her personality. Ellen began working with a woman therapist and I don't know what happened after she left treatment with me. (One disadvantage of being a psychotherapist in private practice is that you often don't get to hear the ends of people's stories.)

Mindfulness is a powerful healing tool in facing trauma

Compassionate self-observation is a core component of psychotherapy in general, and trauma treatment in particular. The dual focus that's required to face trauma memories encourages people to first self-soothe,

and then compassionately self-examine. As I mentioned earlier, almost all contemplative practices—such as transcendental meditation (TM), Zen Buddhism, mindfulness, and Centering Prayer—cultivate compassionate self-observation, and all have become quite popular in current psychotherapies. In my book, *Integral Mindfulness*, I teach a foundation mindfulness attunement practice, and then encourages readers to use the Integral system to guide subsequent behaviors.³⁴ Let's try attunement now:

Attunement exercise:

- *Sit comfortably, close your eyes, and breathe in through your nose slowly and gently for six seconds all the way to your abdomen, and then breathe out through your nose slowly and gently for six seconds. Do this for five breaths.*
- *Focus on the sensations in your body with acceptance and caring intent. Are you tight or relaxed anywhere? Warm or cold? Comfortable or experiencing pain of some sort? Whatever your physical sensations, focus on them with acceptance and caring intent.*
- *Focus on what emotions you are experiencing right now with acceptance and caring intent. Usually, sensations are connected with specific emotions. Are you happy? Sad? Anxious? Joyful? Angry? Bored? Interested? Just notice your emotions with acceptance and caring intent. Feel how they ebb and flow.*
- *Focus on what you are thinking right now. Thoughts tend to rise and fall, to skitter in and out of consciousness. Allow your thoughts to come and go with acceptance and caring intent.*
- *Focus on any judgments you might have at this moment, both positive and negative. Are you being critical of yourself? Proud of yourself? Critical of me suggesting this practice? Grateful for this practice? Observe your judgments with acceptance and caring intent.*
- *Focus on your desires at this moment. Do you want a drink? Something to eat? To lie down and rest? To go outside in the sun? To contact someone? Observe your desires with acceptance and caring intent.*

- *Now sit for two minutes, breathing slowly and softly in and out of your nose and focusing with acceptance and caring intent on your sensations, emotions, thoughts, judgements, and desires as they all rise and fall, moving in and out of conscious awareness. This is attunement—a basic mindfulness practice.*
- *How do you feel after two minutes of attunement to yourself? People mostly enjoy this, though as mentioned above a few find mindfulness practices to be unpleasant. If you find this attunement process beneficial, do it ten minutes a day. If you do, your brain will literally change within weeks. You will have more capacities for self-attunement, which is compassionate self-observation. Strengthening this ability also strengthens your capacities for dual focus and facing trauma productively.*
- *Empathy is attuning to others and is a necessary capacity for a good life. You can practice empathic attunement simply by focusing on another person and trying to resonate with whatever he or she is sensing, feeling, thinking, judging, or wanting—always with acceptance and caring intent. You can try it with someone right now. Think of a person you care about wherever they are and, with acceptance and caring intent, try to connect with what they might be sensing, feeling, thinking, judging, or wanting. This is enormously difficult when we feel irritated or threatened by another, but those moments are magnificent opportunities to grow! When we can empathize while feeling threatened, we have achieved a milestone on the integration-of-defenses line of development—a line that reflects our relative abilities to feel defensive states arise and regulate them into more compassionate understanding and caring action. Two intimate partners high on the integration-of-defenses line tend to create post-issue relationship moments, where conflict is quickly and consistently regulated into respect, understanding, right action, and shared warmth. We'll talk more about post-issue relationships in Chapter 6: Living a happy ending in an imperfect world.*

Normalizing trauma

Mostly when people discuss trauma, there is an undercurrent of “*I’m messed up! Trauma has screwed me up and makes me different and worse than normal people!*” It is true that the more traumas you endure, the more likely you are to have every kind of problem,³⁵ and that some people have horrible childhoods and adult injuries, while others have great childhoods and few catastrophic events. Life is not fair in apportioning problems and struggles! Facing trauma often involves acknowledging a sense of personal failure, contamination, unfairness, or disconnection that can make us resist looking inward.

Also, we all have different personalities with different capacities for dealing with ourselves and the world. Trauma learning is not primarily what happens, but rather how we process what happens. Some of us have trouble self-observing. Some of us have difficulty admitting mistakes. Some of us are more suspicious. Some of us have to work harder to receive caring influence from others. Some of us are more sensitive to real or perceived criticism, and more easily defend, attack, or shut down in the face of stress. All these factors enter into how our Shadow-selves, our adaptive unconscious selves, deal better or worse with trauma learning.

Independent of who we are and what our life circumstances have been, trauma learning is ubiquitous in human development, and forms of trauma learning are *necessary* for healthy development. Encountering distress, problems, and ordeals gives us the opportunities to discover our strengths and weaknesses and grow. The first karate class I attended at fourteen frightened me and I didn’t return for a whole year. Going back and plunging again into that intensely violent culture was an act of courage where I discovered important parts of myself—my courage to face fear and my abilities to learn a challenging and dangerous art form. Knowing trauma is inevitable and often necessary for growth is comforting and destigmatizing for my clients—it makes it easier to do the first stage of facing the painful events and current sensitizations. For instance, it made Frank feel like less of a complete jerk, and Nancy to feel less of a complete loser to know how common infidelity is in the U.S. It helped Harriet to hear that grief is inevitable when losing

someone as important as her grandmother. We'll spend the rest of this chapter exploring how trauma happens to all of us and *has to happen to all of us for us to thrive!*

Why are traumas inevitable?

Humans naturally learn, associate, remember, and anticipate constantly.³⁶ Since we learn most through emotionally charged experiences, extremes of pain/pleasure, failure/triumph, love/hate, and so on are going to result in *learning*—meaning memories/habits/reactions are encoded in our Shadow-selves (our adaptive unconscious selves) to later be evoked by triggers and cues, for better or worse.

Even more, we have a built-in negativity bias that makes us learn extra intensely if something threatens us in some way—physically, emotionally, relationally, financially, morally, or spiritually. This response-to-threat learning often makes us stronger. I once was backpacking with my friend Glen, and he said, “Keith! Stop! You just stepped over a rattlesnake!” I looked behind me and there it was, coiled up on the trail where I had luckily stepped over it. I felt a rush of fear, and also fascination, since you rarely are face to face with a lethal animal. I could have become sensitized by my fear to the point that I never went into the mountains, but I wasn't. Instead I learned to *always* watch where I put my feet on the trail and felt more competent hiking.

Psychological defenses are trauma memories

When babies start to walk around one-year-old, they get into things, make mistakes, demand attention, and occasionally hurt others. Parents push back with, “No!” and, “Stop that!” Upon hearing “No!” children will usually feel a flash of shame (sometimes shame/humiliation/rage) and a tiny bit of social learning takes place. If you are a parent, you know *exactly* what I'm talking about!

But social learning is not just becoming more virtuous, it's also learning how to *avoid* social responsibility. No matter how compassionate and wise parents are, kids will be distressed by boundaries and embarrassments and *always* develop habits of defense. Examples?

- “I didn’t do it!”—denial.
- “You did it!”—projection.
- “Jimmy did it, why can’t I?”—rationalization.
- “I’m a horrible boy!”—passive aggression.
- “Bad dog!”—scapegoating

When your nervous system feels threatened, it tends to protect you with defensive states that disconnect you from the source of threat and push fight, flight, freeze, or fawn solutions. We develop these from conception onward. We learn *healthy problem-solving* involving understanding and cooperation, and we learn *unhealthy problem solving* as we enact primitive solutions to social threats—solutions we started learning as toddlers responding to anger, fear, frustration, and shame. Under threat, our unconscious Shadow-selves reach for instantaneous and ancient solutions like *attack* or *disappear* or *run* or *submit*. These reflexive defenses are ancient because they come with the human instinctual package evolving from billions of years of life on earth and millions of years as humans living in tribes. Defenses are forms of trauma memories—pain-created bad habits that haven’t evolved into better habits—that partly organize how we experience ourselves and relate to others under stress.³⁷

Compassionate understanding of ourselves and others deactivates defensive states, but that’s harder than it sounds! If we do the work, compassionate understanding during stress reflects the highest levels on the integration-of-defenses line. Helping people transform their defenses to compassion and resilience follows the same four steps as healing trauma—face the problem, grow the narrative, cultivate healthy states, and keep the Wise Self/Witness online. We can get really good at this! All four stages of trauma work can be enacted in seconds. Here’s a personal example.

I’m on the phone with a representative from PayPal after someone has embezzled \$1300 from my PayPal account. The guy says, “It’s your problem. You need to figure it out.” I feel a rush of rage and an

overwhelming impulse to say, “Are you f%#ing kidding me!!? I get ripped off on your platform and it’s *my* problem. You a#%^&!!”

- Stage 1: Before I respond, I face the fact that I’m in a defensive state and have amplified emotions—rage and frustration. I’m believing a distorted story—that PayPal is callously neglecting their responsibilities. I have destructive impulses—to swear at the poor guy doing his job. I’ve got diminished capacities for empathy—I don’t care about hurting his feelings. I have challenged capacities for self-reflection—I resist accepting that I’m craving the gratification of lashing out.
- Stage 2: I change the story of feeling ripped off, to one of needing patience and compassion. Ultimately it is inconceivable that PayPal will refuse to reimburse the \$1300, but I will have to spend more hours on the phone with this man, his supervisor and others who are all just doing their jobs. Afterwards I will be glad that I persisted and prevailed (gladness I feel right now as I write this—it took *eleven hours* of phone calls over six days, but they finally made it right).
- Stage 3: Every time I hear the name PayPal or see it written, and I begin to go into my trauma reaction of anger at eleven-hours-of-obstruction-and-unavailability, I take a deep breath, remind myself that I successfully resolved the issue, and direct myself into whatever is in front of me.
- Stage 4: I maintain caring awareness of when I begin to rage against any institution and reach for compassionate understanding.

In short, to resolve a defensive state, you need to face the fact you’ve entered one, understand it as a dangerous protector, and reach for the better protector—compassionate understanding. This is difficult, but what other choices do we have? Keep indulging defensive states which makes them stronger? Keep indulging impulses to attack, and you keep looking for opportunities to attack. Attacking others for release or gratification can become an addiction, perhaps the worst addiction.

We have an integration-of-defenses line of development that reflects how aware we are of defensive states and how readily we transform

them into compassionate understanding and healthy responses to the present moment. The more we grow on the integration-of-defenses line the more we choose healthy states when we're stressed.

Secret knowledge about defensive states

I was teaching defensive states to an eleven-year-old boy named Michael one day, and we had the following conversation:

Keith: "Michael, defensive states are secret knowledge, but not the kind of secrets you don't talk about."

Michael looked puzzled and asked, "What do you mean?"

I told him, "It's secret because most people can't remember what defensive states are when they have them. I can teach you that when you are angry at your mother you have a story of her oppressing you, you have impulses to yell hateful insults like 'You don't love me!' and you lose abilities to see what you're doing or feel how she is distressed. You can see that now, right, while you're not in a defensive state?" Michael nodded and I continued, "Most kids would forget this the next time they are mad at their mother. That's what makes it a secret. Defensive states are secret knowledge when we're in them until we can recognize them and transform them. We can learn to consistently reach for compassionate understanding and right action instead of indulging the destructive impulse. When we can do this, it's no longer secret knowledge."

Michael loved this, and to my pleased surprise caught himself the next time he got angry at his mother and wanted to yell at her. Instead, he took a deep breath and suggested a way they could both be right! This was so cool! I still get chills when I remember it.

Therapist sidebar: Normal crazy and extra crazy

Recognizing and working with defensive states is huge in psychotherapy! Helping people recognize defensive states and regulate into states of healthy response to the present moment is what psychotherapists do in almost every session.

If you are a change agent working with trauma, it's important to know that human reactions to almost all emotional/relational problems—including trauma learning—fall into two categories, normal crazy and extra crazy:

- *Normal crazy is people who are usually willing to work with their defensive states when therapists or others point them out. Normal crazy people often know they have a problem like depression, anxiety, obsessive worry, aggression, chronic irritation, or sensitization, but feel powerless to change. They can self-observe their unreasonable reactions but have trouble self-regulating. Working the four stages with normal crazy clients frequently yields vast relief and a subjective sense of, "I feel like myself again."*
- *Extra crazy is people blind about a significant problem in how they're currently wired, and super resistant to observing, acknowledging, and changing that problem. Personality disorders like narcissistic, anti-social, and borderline are all examples.³⁸ Helping such people resolve trauma still leaves them with extra crazy suffering. The good news is that we can help extra crazy people be less sensitized and more resilient. They can learn to self-observe and self-correct in defensive moments. Facing this makes it easier for them to accept that they have a lot of extra work to do to be living a happy ending at the beginning of something wonderful.*

Extra crazy clients require lots of time and patience because their destructive patterns feel so natural to them, and they believe their distress is mostly from other people acting badly. They have dramatically reduced abilities to be self-aware, flexible, adaptive, appropriate, and self-correcting. As a change agent working with extra crazy clients, it helps enormously to have a team of other therapists and medical or health practitioners on board.

Working the four stages with extra crazy clients can be slow and frustrating, because they tend to generate drama rather than solve problems. That lack of flexibility and adaptability causes them to engage

in the same tired non-cooperative alternatives to problem solving (attack, defend, bully, blame, control, deny, collapse, distort, etc.). Feeling other people are always to blame for one's problems creates negative drama. If extra crazy people stay in treatment and are willing to gradually trust you enough to receive influence, they can learn how to self-observe and self-correct to become more flexible, adaptive, and appropriate. If they keep doing the work, they can make it all the way to living happy endings at the beginning of something wonderful.

*If you have repetitive problems with the world and consistently blame other people or bad luck, you might be extra crazy. If so, don't despair! Find an experienced therapist and talk about what you might not be seeing in yourself. Once you can see the bad habits and start changing them, you are on the road to being normal crazy and much closer to living a happy ending. For more on this check out **Appendix 3: Personalities are the base note of change work.***

Every life has painful problems

As we walk through life, we're not going to always resolve everything into satisfaction and triumph. *Nobody's* life is perfect! There will be defeats, injuries, injustices, or unresolved betrayals leading our adaptive unconscious (our Shadow-self) to sensitize us. Certain risks and triggers will activate defensive states to hijack our consciousness and jerk us out of presence. This is when it's hardest to connect with Wise Self, the compassionate Witness.

It helps to remember, strange as it sounds, that most traumatic programming began with our brains wiring primitive *solutions* to alarming problems. Developmentally, defenses were originally programmed by our Shadow-selves as solutions to painful emotions and distressing meanings. Infants and children do this non-consciously in response to their nature interacting with their cultures. For instance, a daughter of a critical parent might develop a defense of attacking herself first before Mommy can. This girl's nervous system has programmed, "If I attack myself first, I won't be so scared of mommy attacking me."

This can turn into “I’m worthless and unlovable.” The child’s unconscious solution becomes the grown-up woman’s burden.

Unfortunately, a primitive solution, like, "I can't go in the ocean since a jellyfish stung me in Hawaii," can become a crippling inhibition like, “I can't go near the water!" This solution can become an increasing burden, like breaking into an anxious sweat when your son says, "Let's go to the beach!" These kinds of solutions often become social liabilities, like fighting bitterly with your wife who loves to go surfing. Because our brains are genius at learning things and protecting us, they can automatically program new defensive habits of feeling, thinking, and behaving to deal with potential future dangers—sometimes instantaneously. If we don't keep turning defensive habits into better, healthier habits, they can get locked into place, and, even worse, keep expanding.

Therapist sidebar: Exposure and response prevention therapy (ERP)

Currently the psychotherapy of choice for obsessive compulsive disorder (OCD) is exposure and response prevention therapy—ERP. The core process of ERP is to encourage people to be aware of unhealthy defensive impulses (like compulsive handwashing, repetitive self-critical thoughts, or endlessly checking to see if all the lights are off), and then:

- *Center themselves.*
- *Identify the compulsions as poor solutions to anxiety.*
- *Refuse to indulge the thoughts or impulses.*
- *Engage in more healthy, prosocial thoughts and behaviors.*

Clients are taught that consistently turning away from OCD thoughts/impulses and engaging in healthy thoughts/impulses eventually reduces their intense need to do their rituals and they will no longer be stuck in the grip of OCD.³⁹

Central to ERP is understanding that OCD reactions were originally solutions to reduce anxiety, shame, irritation, or sadness, and that there are much better solutions available. This is true for all defensive habits,

not just OCD. Denying responsibility, blaming others, rationalizing destructive behavior, and just not being able to self-observe and self-correct are all bad solutions we developed to protect ourselves from pain. Noticing the bad solutions and reaching for better solutions (compassionate understanding and healthy actions) is applying ERP to all defensive habits.⁴⁰

Bad-habits-into-better-habits is how we grow consciously and unconsciously. It's how we turn sensitization into resilience. We will deal more extensively with this in *Chapter 4: The Third Stage: Choosing Healthy States*.

In the first stage, it helps to move back and forth—to pendulate—from a safe, comfortable arousal level into the trauma memories and feelings, and then back to safe/comfortable.

Neuroscience learned long ago that every time we activate an emotionally charged memory, we can change the content and meaning of that memory. This means when you're remembering the car wreck last year, or the assault in high school, you are actually remembering *the last time you remembered the event*.⁴¹

Memories are not forever! They can be altered and clarified if we are in the right state of arousal and right sense of self. The most powerful intent to bring to this process? Compassionate understanding. Compassionate understanding can rewrite history to make everyone more beautiful, good, and true.

Add compassion and let it happen

Love heals and compassionate understanding is love in action. Our wisest self is characterized by compassionate understanding. Compassionate understanding is the philosopher's stone of integrating trauma. It *always helps* and *never hurts*. Whenever you consider a distressing memory with compassionate understanding, you soften the negative impact the next time you remember.

Exercise: *For the next forty-eight hours, pay attention to any critical judgments you make about yourself or anyone else, past, present, and future. When you discover a critical judgment—like, "I look terrible in this shirt," or, "That woman is mean!" or, "I so screwed up when I couldn't remember her name!"—focus on that situation with compassionate understanding. "I look OK in this shirt, but I am tired." "I'll bet that woman is having a bad day, and I'm a little afraid of her." "Janice looked hurt when I forgot her name, but that means she cares what I think. I'll say something nice to her the next time I see her."*

*Write about your experiences in your journal.
Show what you've written to someone you trust, and then write about the conversation, what you both said and how you felt.*

I believe compassionate understanding is a human superpower, and I encourage you to practice it all the time. If you do, you will accelerate your personal growth on most developmental lines.

Worldviews

We don't all see the same world! We each walk through a unique universe of assumptions, values, and experiences that determine how we interpret the world. This is our *worldview*, but worldviews morph and change over time. We also grow through progressive worldviews, starting with just feeling the world at birth and progressing through stages of increasing complexity. As adults, we'll tend to spend half or more of our time in one of the ones we've experienced growing up.

What are the major worldviews?

Briefly:

- **Sensorimotor worldview:** At birth the world you entered was all emotion, touch, connection, movement, and sensation. This is a sensorimotor world with no sense of a separate self.
- **Magic worldview:** At three you had a firm sense of yourself as a separate being and you probably lived in a magic world where adults were giants who could perform miracles.
- **Conformist worldview:** By eight-years-old you could understand the calendar and seasons, and what was right or wrong was

determined by parents, school, or other groups you felt moved to conform to.

- **Rationalist worldview:** As you became a teenager, you probably became more interested in your peers, and quite likely challenged some cultural beliefs, finding them irrational. Maybe you were interested in merit-based hierarchies like grades, teams, and social hierarchies where how you behaved objectively determined success or failure.
- **Pluralist worldview:** If you happened to become concerned about whether other people or animals with being cared for and you didn't like hierarchies where people were directed by others you were probably shifting into a more pluralistic worldview.
- **Integral worldview:** If you find yourself looking at different perspectives and changing your mind when you encounter new data, you might be in an Integral moment where you have a felt appreciation for multiple points of you and diminished fear of death.

Compassionate understanding helps us grow through different worldviews. Children grow through worldviews starting with sensorimotor at birth and transitioning into me-first egocentric in the first year. Adults tend to hover more in some worldviews than others. Here are intersections of early experiences and adult worldviews:

- Egocentric—common in me-first small children and narcissists.
- Conforming—common in grade-schoolers and religious/political fundamentalists.
- Rationalist—common in critical thinking highschoolers and merit-based competitions like sports and business.
- Progressives—care-for-everyone idealists, common in college students and liberals.
- Integral—Felt appreciation for all points of view, common in spiritual teachers and wise guides.

The higher you rise on many developmental lines—like how well you love, care for the world, think, or relate—the more you naturally practice compassionate understanding. If we grow into living in an Integral

consciousness, we mostly feel appreciation for all points of view, we see the healthy and unhealthy sides of most perspectives and actions, and we have diminished fear of death. The Integral worldview involves increasing compassion for everyone and everything.⁴²

But why are traumas *necessary* for optimal development?

We need periodic stresses to grow and get stronger. Dealing with life challenges and traumatic events can be like physical training. To optimize bodily strength, you have to push your physical edge far enough, but not *too* far. Similarly, psycho/spiritual growth comes from pushing our psychological/spiritual/social edges far enough, but not *too* far. This process of the right amount of stress strengthening us is called “hormesis” in the biological sciences, where the right stressors (like not too much or too little of a medication, nutrient, or activity) can cause cells and organs to come back stronger.⁴³

Take empathy. Many parents believe that we learn empathy mostly through other people empathizing with us from infancy onward, but that is only part of the story. We also need necessary frustrations and boundaries (which can feel traumatic) from other people to learn empathy. We don't learn empathy just by people caring about and attuning to *us*. We also learn empathy by people saying "No! You have to stop and attend to *me* right now because there's something going on with *me*."

For example, Daddy hits his hand with a hammer as he's building five-year-old Sam's playhouse, and it *hurts* (he might have to go to the ER). Sam starts asking for a table in his playhouse and Daddy, says, "Stop! I just hurt myself badly and need to focus on whether to go to the Doctor or not."

- If Sam *experiences* that "Stop!" with distress or humiliation—if it *feels* wrong, overwhelmingly painful, or unfair—his nervous system might create trauma programming. This is especially likely if Daddy *habitually* yells at him when Daddy hurts himself. These repetitive small t traumas might eventually result in Sam

developing a defensive state where he gets hyper-scared when Daddy or others begin to get angry.

- If Sam *experiences* that "Stop!" as just and fair, he might feel somewhat ashamed, but also become slightly more empathic. He might say, "I'm sorry you're hurt Daddy! How can I help?" Daddy smiles at his concern and the adjustment from self-absorption to empathic care is reinforced. Sam feels a warm sense of empathic resonance—he has become slightly more attuned to others. In many ways, empathy is a form of *healthy sensitization*. We become more sensitized to the ebbs and flows of another's emotional states and feel some responsibility to help if they feel injured.

Of course, *how* Daddy talks to Sam and *how* Daddy conceptualizes Sam have huge impacts on how the event affects Sam. If Daddy talks respectfully and conceptualizes Sam as a good guy, Sam is more likely to grow from the event into feeling closer and more effective with Daddy.

Daddy's nature and habits matter a lot! If Daddy is generally warm, never cruel, and always fair, Sam is more likely leave the encounter a bit deeper. If Daddy is generally contemptuous, hostile, disengaged, or permissive, Sam is more likely sink into defensives like attack, submit, flee, blame, rationalize, self-criticize, or deny.

Evolution demands trauma learning, especially through dominance and submission

Every second we are influenced by multiple visceral and demanding evolutionary drives. We all have powerful social instincts to survive, reproduce, and fit in with the group. Humans evolved in intensely interdependent hunter-gatherer groups. In these groups, we instinctively desire social positions and recognitions which feel consistent with who we believe we are and how we should be treated.

If we feel like our social position is being threatened, or if we feel targeted by another member of the group, our nervous systems go into defensive reactions, and we push back or submit psychologically,

sometimes even physically. You can see this in all primate groups. Watch a troop of monkeys for an hour and you see many kinds of social dominance and submission behaviors, sometimes accompanied by screaming and attacking, and sometimes as subtle as a slight hand gesture to move a lower status monkey from the path of a higher status monkey.⁴⁴

When two people start aggressively pushing back and forth with each other, a similar form of dominance contest is going on, and, if nobody backs down, you have an escalating conflict that probably ends badly. In my career I've conducted over seventy thousand therapy sessions, a third of which were with couples, and I've seen escalating conflicts in hundreds of forms. If a couple *can catch and regulate* these conflicts back to warmth, they grow their love. If they *allow conflicts to escalate* to bullying or submitting, they degrade their love—can even kill their love—and *normalize* and *practice* being bullies or victims.

We sometimes forget that social instincts are there for a purpose—to maintain social hierarchies so the tribe can survive, thrive, and compete successfully. These instincts gave such enormous evolutionary advantages that they are universal in human communities, much as language (central to development and uniquely human in most ways) is universal.

Hundreds of thousands of years ago in the primordial tribes, dominance display and ritual submission were important forces to maintain social hierarchies. One member dominates, one submits, the social fabric is maintained, and people don't kill or seriously injure each other, thus protecting vital human resources for the tribe. We see this today in military communities where those of lower rank routinely salute those of higher rank. Defensive dominance/submission rituals rather than physical violence maintain bodies and increase chances of passing on genomes—huge evolutionary advantages for individuals and tribes, in spite of the psychological damages potentially inflicted in the process.

Care, share, and be fair

On the other hand, humans are incredibly cooperative and communal! We have powerful instincts to care, share, and be fair with others. We enjoy cooperating and discovering win/win situations. Growth on the integration-of-defenses line involves strengthening our capacities to choose cooperation and problem solving when our defenses push for dominance/submission.

These care/share/be fair social instincts make us an *ultrasocial* species, in many ways like ants or termites.⁴⁵ Two chimpanzees can't cooperate to move a log, while we humans can create communal projects like building pyramids and landing on the moon. Our ultrasocial natures make us incredibly sensitive to other's expressions and acts and intensely committed to maintaining our sense of ourselves as virtuous beings securely embedded in larger cultures.

Ironically, this heightened sensitivity and hunger for social connectedness also make us more vulnerable to trauma programming when our identity, worth, or social positions are threatened.⁴⁶ This heightened social sensitivity also explains why talking to caring others is so healing for us when we feel damaged—we feel soothed by others' understanding and approval, and become more able to self-reflect, empathize, and consider different ways of thinking and acting.⁴⁷ This is the awesome power of the first stage of trauma treatment—facing the trauma experiences and sharing them safely with a caring other.

People turn the drives into art

I often think of humans as the animals who turn the drives into art. To deal with instincts optimally, we need to include and transcend dominance/submission approaches into more collaborative and beautiful (artistic) forms of problem solving.

In the last sixty years, social and neurobiological research has revealed astonishing secrets of optimal development from conception to death. Yes, we all are driven by multiple instincts that go all the way back to the beginning of life on earth. Yes, evolution has primed us to be conditioned by traumas to protect our genome and social structures, for

better (resilience) or worse (trauma learning). Yes, we can't ignore the drives and they are constantly informing and affecting us in multiple ways. And, yes, we now know ways of thinking, being, relating, parenting, sexing, loving, and healing that include and transcend those drives into better living and loving.

It's *really* complicated! But we have no choice in dealing with these developmental dynamics! We're constantly relating with ourselves, others, and the world—in more painful or more pleasurable ways—while all the time our adaptive unconscious (our Shadow-self) is shaping habits of thinking, feeling, relating, and responding. We always do this within multiple social contexts that can be more or less supportive. We are always dealing from whatever type of people we are—introverted, extraverted, shy, assertive, suspicious, trusting, reactive, mellow, etc. We are always coming from different levels of maturity on different capacities (lines of development), like moral discernment, social effectiveness, and growth on the integration-of-defenses-line of development.

Exercise: *Sit down in a comfortable place with your journal. Look back over your life to a difficulty/problem/crisis you encountered and satisfactorily resolved:*

- *Maybe you failed calculus, felt stupid, found a tutor, studied hard, and then excelled.*
- *Maybe you couldn't hit a golf ball to save your life and felt ashamed and humiliated playing golf with your friends. Perhaps you took lessons, worked hard, and became a decent player.*
- *Maybe you kept choosing self-absorbed men who cheated and left, leaving you feeling broken relationally, so you got into therapy, learned about yourself in relationships, developed skills at reaching for healthy love, and then found a good guy who was willing to work through the conflicts that inevitably arise in intimacy.*

Whatever difficulty you faced and satisfactorily resolved, write about it in detail.

This is how life deals us ordeals and traumas that become growth experiences if we work through them. Now, write about how your sense of self might have changed as a result of working successfully through this problem. Did this successful problem-solving effort help you have a more positive life story? Did it help you be more effective with others? Write about this.

After you've written all this, wait a couple of days and read what you wrote. Do you have any insights or emotional surges as you read your entries? Write what your reactions are, and then share everything with someone you trust, with an emphasis on how all of it informs your life story—your autobiographical narrative.

Growing your life story is what Stage 2 of trauma treatment is all about, and we dive into transforming our struggles into living the Hero's Journey in *Chapter 3: Stage 2—growing your life story*.

Chapter 3: Stage 2—Growing your Life Story

When Nancy found out about Frank's affair, the story of her marriage changed from positive, uplifting, and grateful, to horrible, shameful, and outraged. She desperately needed a new story, and that story needed to feel *more beautiful, good, and true* than the previous two stories of before the fall and after the fall. At the beginning, this seemed totally impossible to her. There was no way she could ever feel even close to the same positive story she had of her marriage before the affair. The ideas of feeling wiser and stronger were ludicrous and infuriating to her.

Your conscious self—the *you* who is reading this—does not decide when to encode trauma learning. Your cumulative memories, relationships, instincts, habits, and past selves, organized mysteriously throughout your brain and body, call the shots on what is trauma. Our conscious self is a thin film on top of an ocean of unconscious drives and decision making. This ocean generates intuition, moral judgment, empathic resonance, defensive reactions, intuitive flashes, and spiritual connectedness—all centered in the non-linear right hemisphere of our

brains.⁴⁸ Neuroscientists call this information processing and decision-making entity the *adaptive unconscious*. I call it our *Shadow-self*.⁴⁹

All psychological/spiritual/relational growth involves your Shadow-self generating better reflexes and meanings—literally becoming more complex and adaptive. You can learn a new perspective in seconds, like “It’s a good idea to be kind to yourself and others.” It can take *thousands* of conscious adjustments from unkindness to kindness and *years* of time before you *instinctively* are kinder to yourself and others where previously you were critical or self-destructive. Progressing through the four stages of trauma work grows your Shadow-self and creates enduring bridges between your conscious awareness and your adaptive unconscious.

You fall off your skateboard and break your collar bone (I did this at 45). Does it become a trauma memory, a resilience-boosting lesson learned, or some of both? Back then, I would have *consciously* chosen no trauma and lots of resilience! Of course I would have, *if I had a conscious choice!* As it was, it was some of both. I never skateboarded again and still get shivers when I walk over that spot on our hill where I fell. On the other hand, I’m more entertained than horrified by the memory of hurtling through the air towards the street, and I feel wiser as a result of the incident. I realize now that the accident was a wake-up call to examine my risky behavior. The original story of loss has transformed into a story of adult maturation.

My Shadow-self decided the event was traumatic—the fall sensitized me to be easily triggered to mortified fear by the memory or a reminder of the incident. Like many, I was ashamed I had somehow created or allowed the accident to happen. I even felt stained by my post-traumatic distress—apparently my Shadow-self felt it was humiliating for me to develop trauma learning! I didn’t like this shame story and instinctively knew there was a better, wiser story if I did the work. This took conscious effort. I needed to progress through all four stages, and I did! Eventually the story began to be a part of a larger more positive narrative of my life.

As with all psychological growth, a necessary sign of progress on a problem is it *feels* different. You know your Shadow-self has grown when you are less frequently triggered, and more self-supportive when triggered. When I think of my skateboard history now, the broken collar bone is the culmination of decades of edgy fun without much injury, but periodic unnecessary risks. As we mature, our bodies often need more care, and this accident woke me up to that reality. It was a great end to an old myth of personal invulnerability—a myth I had cultivated for decades with martial arts and physical training.

My conscious Self wasn't responsible for programming trauma learning—my Shadow-self decided that for me—but I was completely responsible for dealing with it. You are not responsible for sensitization and trauma learning—your Shadow-self decides to program sensitization. Your conscious self *discovers* the trauma learning, leaving you *completely* responsible for integrating and transcending it. Integrating and transcending trauma learning always changes our life stories, our autobiographical narratives, for the better.

Exercise: *Have you ever had an intrusive image, memory, or idea that feels bad and shows up unexpectedly? Do you have one currently in your life? I suggest you:*

- *Write in your journal about the image, memory, or idea in as much sensory detail as possible. Write about how it feels when the wave of memory/feeling/judgment comes through you, and what it signifies about you.*
- *How does it feel in your body as you remember? What sensations arise when you focus on this event? What emotions do you associate with these sensations? For instance, tightness in your chest can indicate anxiety, or clenched jaws can reflect anger.*
- *What beliefs do you have about yourself around this experience? What is the story about you that involves this event?*
- *Write down, “My nervous system—my Shadow-self—decided to program these reactions and meanings, and I’m going to grow*

through this distressing experience into feeling stronger and wiser.”

- *Right after you finish writing the sentence, look at it, and read it back to yourself out loud. Write how you feel in your heart area as you do this.*
- *Does it feel right in your heart area, perhaps a pleasurable warmth or loosening? Does it feel wrong, perhaps a tenseness in your heart area, as you write the sentence? Write about this heart sensation.*
- *Share what you’ve written with someone you love.*

It’s tricky to grow your Shadow-self. Everything we think or do affects our adaptive unconscious, but never in exactly the same way. I suggest exercises like this in sessions as often as possible, knowing that some will be absorbed into Shadow and integrated into a more complex and harmonious adaptive unconscious.

- *If you felt pleasure in your heart—a loosening sensation—when you wrote and read the sentence, “My nervous system—my Shadow self—decided to program these distressing reactions and meanings, and I’m going to grow through this experience into feeling stronger and wiser.” your Shadow grew a tiny bit by resonating with a deep truth.*
- *If you felt pain, tightening, or blankness reading the sentence out loud, you’ve discovered a place to focus compassionate understanding and healing attention, which will grow your Shadow.*
- *If you felt nothing writing and reading the sentence, this exercise is probably not for you.*

You can read more about growing your Shadow in Chapter 5: The fourth stage—Be the Compassionate Witness and let Wise Self call the shots.

PTSD

PTSD—post traumatic stress disorder—has existence. It’s a particularly painful form of memory that intrudes into the present and burdens us with overwhelming feelings, images, sounds, tastes, smells and especially toxic stories. Sometimes, in the face of horrific events, our

unconscious self-protection is terror and rage. When reminded of the event (triggered by anything our Shadow-self associates with the memory), painful images, smells, immobilizing panic, impotent outrage, or shame hammer us demanding attention and action. Our Shadow-selves are creating major mobilization—extreme sensitization—because we somehow believe the threat is happening *right now!*

If all this wasn't bad enough, occasionally PTSD comes *years* after an event! You can begin to have flashbacks and panic attacks that feel like they're coming out of nowhere. This is the "Post" part of Post-Traumatic Stress Disorder.

When I was a freshman in college, the university had a system of assigning roommates by computer. Larry and I were assigned to each other, and it was a good match. He was kind, caring, and taught me how to play the guitar. He also taught me how to smoke pot, and eventually revealed how he and his cousin had a business selling psychedelic drugs to college students. As Larry and I became friends, I was attracted to the romance of the acid/pot scene in 1968, and foolishly volunteered to accompany him to a meeting he felt some anxiety about.

Of course, the meeting turned out to be with undercover state narcotics agents. Guns came out, and we were arrested. It's an amazing experience to have a semiautomatic handgun three feet from your nose in the hands of someone screaming "Freeze!" My first thought when it happened was, "I hope this is the police!" because they almost certainly wouldn't shoot barefoot me with my hands up. The officers put us in separate cars and hauled us off to jail. The guys in Larry's car were so euphoric from making the arrest that they ran into another car while shouting at coeds driving through Isla Vista (the student community next to University of California at Santa Barbara).

Through some miracle, my Aunt Dorothy, then the Dean of the Southern California University Law School, was in town for a conference, and bailed me out of jail the next day—a miserable eighteen-year-old long-hair facing catastrophic consequences for his foolish actions. With the

help of Aunt Dorothy's husband, my Uncle Jim who was a Superior Court judge in Los Angeles, my case was dismissed, and my life wasn't wrecked. I always remember what Uncle Jim said when I thanked him, "We're always happy to help the first time."

I was put off at the time by the comment but have since come to more deeply understand it. Helping the first time gave me the opportunity to grow from the experience—and it worked because I was never arrested again, and never had to ask for that kind of help again. My life story shifted from being a relative innocent to the dangers of the 1960s and 70s American culture, to being a more mature and cynical survivor of an interlocking system of institutions, all of which were corrupt to a certain extent. Aunt Dorothy and Uncle Jim were happy to help, and I met the challenge of learning how to better navigate life (more resilient). If I had created a pattern of self-destructive behavior, calling from jail again and again, Uncle Jim and Aunt Dorothy still would have helped because they loved me, but their help would eventually have become codependent, enabling me to keep choosing a self-destructive life story of constant victimization by a hostile world.

This difference between help and codependence reflects the challenges of human healing. As you can see from the many dimensions we've explored so far in this chapter, what is healthy or unhealthy is often determined by complex forces involving intertwined variables such as self-awareness, maturity, capacities to receive influence, and a variety of social contexts. All these contexts involve different types of people, in different states of consciousness, at different levels of development in moral reasoning, self-observation, contextual understanding, and interpersonal relating. Help and codependence also involve our Shadow-selves, our adaptive unconscious selves, deciding what will be trauma learning leading to codependence and what will be resilience learning helping us self-correct towards health, love, and success.

How do we distinguish between help and codependence when people and life are so complicated? Practice the four stages! The four stages of dealing with trauma lead to deeper understandings of ourselves and

others, gradually making help and codependence more obvious. Awareness regulates and viewing anything with compassion heals us and guides us.

Maybe he has a gun

After my arrest, I developed PTSD reactions. I'd climb into an elevator with one or two other men, and suddenly have a wave of panic accompanied by an image of one of them pulling out a gun and sticking it in my face. Over time, this reaction faded, as many PTSD reactions do, when I refused to indulge fears of entering elevators. Letting fear decide for you instead of your own Wise Self creates sensitization and strengthens trauma programming. Even then I knew that making the more reasonable decision in the presence of fearful impulses to do the contrary would strengthen me. After all, we are wired for resilience and integration, and I wasn't so immobilized that I couldn't keep reminding myself I was safe in elevators.

Similarly, the meaning of the original event changed, much as the meaning of my skateboard accident twenty-five years later changed. As a result of the arrest, the night in jail, and my subsequent journey through the legal system, I had a deepened understanding of the inequities and biases embedded in many U.S. institutions and have been a fierce advocate for more care and fairness ever since. The episode especially taught me about institutional racism. By the time I appeared before judges, the long-haired barefoot hippy was gone. I was just another well-groomed white college student who had made a stupid mistake. If I had been black, Hispanic, a political activist, or not related to influential people, I imagine it would have gone much worse for me.

Post-traumatic stress reactions can occur when our Shadow-self is shocked enough to hyper-sensitize us to certain sensations, social cues, memories, or experiences that are symbolically connected to the event(s). We can get super-emotionally reactive. We might have flashbacks where suddenly we feel lost in the sights, sounds, and overwhelming emotions of previous horrors. We might have nightmares.

We might lose abilities to function in important situations because we are triggered, or are overwhelmed by *fears* being triggered.

These experiences are often hard to face. Who wants to focus attention on material that freaks them out? You can see how people try to suppress, deny, or avoid trauma learning. But the first stage of trauma healing is to do exactly that—face the trauma conditioning. I could have stopped getting into elevators with other men. I could have stopped entering student apartments that looked like the one I was arrested in. I knew enough at the time to not indulge such inhibitions and fears, but I certainly had to struggle with them when they were triggered. I had a responsibility to help grow my Shadow-self into more resilience. I faced the experiences, accepted responsibility for them, talked about them to understanding others, and kept directing myself to do what was right and not let fear ever decide for me. This was me instinctively doing the first stage of resolving trauma—facing it.

I also instinctively engaged in the second stage of resolving trauma, changing my life story from one of victimization to one of expansion. I eventually felt better protected from the institutional and cultural dangers of the time. I felt more understanding of others' PTSD reactions and problems. I felt wiser in the ways of the world.

The Hero's Journey

I was an intense teenager. A happy childhood morphed into a crazy 60s world. The Viet Nam war, the draft, racism, the American diet—I saw nothing I wanted in any of it. As I entered adolescence, my aging relatives were dying, my anxious and depressed emotions were overwhelming, and my emergent sexuality was urgent and unmanageable. Life, family, the world, sex, and people were too much, and I went crazy. I was overwhelmed with despair, negative and combative, and a nightmare to live with. My parents wisely got us into family therapy, and psychotherapy felt magical to me (though I was too far gone to recognize this till much later). After a number of sessions, a five-week hospitalization (complete with ECT—electro convulsive therapy), I finally got more or less on track as a young man. In the

hospital I realized I needed a new life story. I had always admired healers and warriors, and so I decided to become a psychotherapist and a martial artist. Three and a half years later I was awarded a black belt in Shotokan Karate, and ten years later I got my first psychotherapy license. I also continued episodic therapy sessions with our family therapist, Dr. Joe Erickson, through my teens.

When I was 17, Joe gave me a copy of *Hero with a Thousand Faces*, by Joseph Campbell.⁵⁰ That book woke me up! I not only saw myself in the archetypal forms, I saw *everyone* living their own personal myths engaged in their own epic journeys. The Hero's Journey is a universal archetype in all human cultures. Whether we like it or not, we are always living part of a story where:

- *We're called.* For me the first call was the challenge of adolescence in the 60s.
- *We refuse.* I went crazy rather than take on the responsibilities of my emergent life in a crazy world.
- *We are called again.* I was in the hospital, realizing I needed profound change.
- *If we say, "Yes," we must face the Threshold Guardian.* The threshold guardian is any force that blocks us from our journey. It can be self-doubt, a negative self-story, or an actual person or institution that must be handled to progress. I was frightened of the intensity of the karate practices, and the social and athletic demands of my 15-to-18-year-old life. I felt ill equipped socially to deal with the teen world of the late sixties. I faced the challenges, showed up to train and grow athletically and socially, and ultimately progressed in all the arenas I entered.
- *We struggle through the path of trials.* The most physically dangerous time for U.S. teen boys is 15 to 25, and I was no exception. My arrest was one of a number of trials during that perilous time. With each one, I tried to be guided by my Wise Self and to do right, gradually developing confidence in myself as a healer and a warrior.
- *We find guides and spiritual support:* The couple who offered me a ride out of Crescent City, my Aunt Dorothy and Uncle Jim, my

therapists, my friend Earney Woods who suggested I apply to the UCSB counseling program, and my martial arts teachers were all angels and guides on my road of trials.

- *We enter the dark night of the soul.* My night running from three assailants in Crescent City was on the heels of a devastating breakup with my lover of three years, who had decided I was not the guy for her. Meanwhile my current partner was taking a romantic vacation with her hot new lover. I hadn't felt such despair since my insanity at 15, but this time I was wise enough to reenter therapy and refocus my intentions to love and grow.
- *We reconcile with the divine masculine and the divine feminine.* I chose therapists versed in Psychosynthesis and Jungian psychology because I knew different parts of me needed integration. I began to see how the deeper archetypal forces in me were connected to profound energy fields in the material and spiritual worlds. I saw clearly how the spirituality at the core of my martial arts was the most profound benefit of the training.
- *We are transformed into deeper consciousness.* I began to have my first experiences of mastery in doing psychotherapy and teaching psychotherapy. I found a partner who wanted to grow with me—my wife Becky who is still with me after 49 years. My spiritual and clinical practices began generating synchronicities and psychic experiences that further convinced me that (as I first read in Frank Herbert's science fiction novel, *Dune*), "There is another world all around us."
- *We return home to give serve the community.* I became a therapist and teacher for individuals, couples, families, and groups as Becky and I did our best to have a loving supportive family and keep growing as individuals, friends, lovers, and parents.

Returning home to serve is huge! Service to others from our strengths, wounds, and life lessons is healing to us. It amplifies post traumatic growth. As Nancy and Frank worked through the trauma of Frank's affair, they became more generous in spirit to each other and their kids. Healthy service to others heals us.

We are on different Hero's Journeys all the time. Our journeys as mother, father, expert, survivor, lover, healer, maker, and so on are all examples. The challenges, passions, and demands of life are calls to accept or refuse. Disappointments, accidents, assaults, setbacks, desertions, betrayals, and the random insanities of existence are all examples of challenges on our roads of trials. Our fears of change and resistances to challenges are threshold guardians we must face and overcome to meet the call. Traumas arise to plague us and shape us. If we keep moving forward, open to insight and loving influence, we'll eventually find ourselves living a happy ending at the beginning of something wonderful.

Hero's journey exercise: *Sit in a comfortable place with your journal, and write detailed answers to the following questions:*

- *Have you ever been called to change, create, heal, or serve by some request, disaster, inner turmoil, intense ambition, yearning, or relationship?*
- *Did you say "Yes" to the call, or did you resist? Write about what you did and how you feel now about your reaction.*
- *If you said "No" to the call, how did that feel? Did the call come again identically or in another form, and did you respond differently?*
- *If you said "Yes" to the call, what or who were the threshold guardians? Were they your own self-doubts or negative stories? Were they physical limitations or actual people or institutions? Whatever the obstacles, how did you manage them to move forward?*
- *What were the adventures and trials that followed? What did you learn from each?*
- *Were there moments of deep despair or overwhelming distress? How did you manage these dark-night-of-the-soul moments? Who were your guides and lifelines?*
- *What changed in your sense of self as an adult, growing up in the family you grew up in, participating in the cultures around you, and now the veteran of this journey? When you write, emphasize any new understandings you might have developed about your*

family, yourself, your social world, your work, your sexuality, or your powers.

- *How have your experiences helped you deal with and help other people?*
- *After you write all this, read it from beginning to end, and monitor how you feel. Do you have a deeper understanding of yourself and the world? Do you feel more the hero in your own story? Do you feel badly about any part of these experiences?*
- *Share everything with someone you love, and then write about how you felt or what you discovered in the conversation.*

Changing your life story, one episode at a time

When we avoid facing experiences, memories, or parts of ourselves, we drastically slow down our growth. Many of us have personal doubts like, “I’m not normal,” “I’m weak,” “I’m a bad student,” “I’ll never change,” “I’m permanently crippled or stained by my trauma history,” and so on. Many of us have memories we avoid—memories of shameful experiences, horrific traumas, or grinding oppression. *All* of these are important parts of our autobiographical narratives—our life stories—and need to be integrated into our evolving self.

In the first stage of trauma work, facing the trauma, we learn to stay safe in the present moment while evoking or responding to trauma learning. We do this until we can face our past, present, and future with compassion. In the second stage of trauma work we look for personal meanings and discoveries in each experience. We grow our life stories to feel guided on our hero’s journeys. Here is some of what Frank and Nancy had to go through to grow their stories.

Frank and Nancy stuck in trauma stories

Frank and Nancy were caught in trauma stories after the affair, but different trauma stories.

Frank had carried doubts about his masculine power and likelihood of personal fulfilment from his earliest memories, especially with women. His father believed in “Toughening up” children by emotionally abusing

them. His mother was sometimes great, and sometimes preoccupied with the stresses of a demanding husband and five children. This left Frank prone to feeling needy and not easily soothed in intimate relationships with women. He felt most secure being romantic and having sex with Nancy—an endless wellspring of fulfillment before children, and a regular source of frustration for Frank with two kids competing for Nancy’s attention. As a child, Frank was shorter than his contemporaries, sensitive emotionally, dyslexic, but gifted with deep intelligence, conscientiousness, and friendliness. He had to keep emotional vulnerability to himself in his family, where talk about emotions, and especially sensitivities, was contemptible to his father and incomprehensible to his mother and brothers. He managed to do well in school and learned to create alliances with other capable boys and girls. Unfortunately, he always felt less attractive to the beautiful girls, and separate from his friends. It was normal for him to keep secrets of anything that might cause criticism or attack to come his way.

At forty-five Frank’s story of himself had changed to him feeling like a successful guy with an ideal family who deserved fulfillment and was entitled to keep secrets and bend the rules for his own gratification. This led him into his affair with Cristi, which led to Nancy finding out, which led to the horrible realization that his marriage might not survive the affair. Suddenly his beloved family seemed as insecure and full of rage as his boyhood home. In the past, Frank’s commitment to personal growth and participation in therapy was soothing and comforting to Nancy and always led to more intimacy and a sense of deep mutual trust. Now Nancy was suspicious of everything he did—even his therapy—and it broke his heart every day to feel her walls of anger and sexual repulsion. His new story was one of confusion and remorse, paradise lost, where nothing was as it had been before.

Nancy grew up an only child with loving appreciative parents who cared for each other and made sure she was always in honest, secure environments (home, school, sports teams, etc.). She was successful at everything she did, and her world was always predictable, ordered, and fair. When she met Frank, he was a successful top executive who valued

her beauty, passion, and intelligence and they instantly connected at depth. She loved Frank's genuine interest in personal growth and psychological insight—two of her main passions. Their ideal marriage and two beautiful children fit her life narrative of goodness and fairness.

When Nancy discovered Frank's affair, it shattered her world, leaving her wondering what else in her universe was not as it seemed. This new story of betrayal and uncertainty felt like a fall from grace, a loss of innocence, and a disorienting plunge into chaos. And it was so unnecessary! She blamed it all on Frank. Nancy unconsciously held onto her rage and doubt because it felt horribly vulnerable to let herself trust or want him again, even though what she most yearned for was to be back in their couple/family storhy of success, intimacy, and growth.

We three were discussing this in our sixteenth session after Nancy discovered the affair. By this time Frank had appropriately told Cristi that they could have no contact, and answered in detail all of Nancy's questions about the affair and any other secrets he might have had in their ten years of marriage (interestingly, there were no other affairs or major secrets—cheating was not central to Frank's identity or lifestyle). By now both had finally agreed they wanted reconciliation but were feeling stuck in their trauma stories.

I asked them, “The betrayal story is devastating to you guys. What new stories do you want to be living going forward?”

Nancy quickly responded, “I want to be married to a man I trust to never cheat on me!”

Frank winced, feeling ashamed and angry, “It was a huge mistake! I never did it before and I'll never do it again. I had no idea what could happen.”

Nancy: “Come on! You think you could *fall in love* with another woman for over a year and not have it wreck our marriage?! How could you...?!”

I interrupted, as I often do with distressed couples, “We’ve processed the affair from lots of angles, and we all can see how both of you missed signals that you were not as close as you assumed. The question is, do you trust each other to tell the truth at this moment?”

Frank answered quickly, “I absolutely trust Nancy is telling me the truth as she sees it.”

Nancy took a little more time as she looked speculatively over at Frank, “I trust that *at this moment* Frank is doing his best to tell the truth.”

I asked them, “How do you guys feel as you answer my question?”

Frank, “More relaxed and a little less scared of Nancy hating me.”

Nancy, “I feel a little warmer and more connected to Frank.”

Now they were relaxing into more hopeful and loving stories. I wanted to help them strengthen these stories, so I asked, “What do you think this means about what you want and how you feel about your marriage?”

Nancy, “I guess that I want to feel warm and connected. I want to believe Frank is honest with me.”

Frank, “I definitely want to turn the page and be back to where we were.”

I saw Nancy begin to bristle at this, so I jumped in before she could attack him, “Frank! You two will never be back to where you were! That ship has sailed! Nancy used to live in a world where her husband would never lie and cheat. Now, if she stays, she needs to believe that this whole mess was a major wake up call for you to close your fidelity and honesty loopholes, and for her to learn to forgive the humiliation of having been lied to for so long.”

I quickly turned to Nancy, to encourage her to connect:

“Nancy, you’re challenged with the reality that there is no certain guarantee of Frank never cheating again, but also that you can’t have a marriage with love, connection, and trust without letting go of your anger and allowing yourself to enjoy Frank again as your friend and lover. You both need to feel this is a *new* marriage where you became wiser and stronger through working through this trauma. This crisis will either be a symbol of losing each other and moving on, or a symbol of using a major disaster to more deeply understand yourselves and more completely commit to each other as friends, lovers, and life partners.”

Nancy, “I want that story to be true!”

Frank, “I’m doing my best to make all that happen!”

This was typical of hundreds of exchanges we all had over many months. The second stage of growing your life story to feeling wiser and stronger as a result of resolving trauma is challenging. It is a road of trials that always requires risks like the ones Nancy had to face forgiving Frank enough to love and enjoy him again.

Eventually Nancy and Frank’s stories did change into ones of hope and renewal, but they had more trials ahead on their individual and shared Hero’s journeys.

Chapter 4: The Third Stage—cultivating better states

What are states of consciousness?

You are in a state of consciousness right now!

- You have working memories your Shadow-self has provided to relate to these words.
- You have a story of yourself, me, this message, (and who knows what—the unconscious is full of surprises!).

- You're in a *felt* emotional state of some combinations of interest, curiosity, irritation, or any of other countless emotions.
- You have action tendencies to keep reading or to do something else.

Memories, stories of the moment, emotions, and impulses are cumulatively *states of consciousness*.

I just described waking states of consciousness. We also have dreaming states and deep dreamless sleep states. Dream states consolidate memories into our deep unconscious, work through waking conflicts, reveal secrets/fears/desires from our Shadow selves, and can guide our waking life. Deep dreamless sleep is incredibly restorative for our entire body/mind system. Trauma often disrupts sleep and intrudes into our dreams, which is not an entirely bad thing. Traumatic dreams can be dealt with using the same four stages that we use for working with waking consciousness, and so can become therapeutic tools.

Dream exercise: *What's the last dream you remember? Tell yourself the dream story as if you were describing it to me as it's happening, and then ask yourself, "What is my Shadow-self, my adaptive unconscious, trying to teach me in this dream?" Write the dream and your answer in your journal. Share what you've written with someone you trust.*

States everywhere

All life exists in states of consciousness. Living organisms feel and relate from submicroscopic bacteria to human self-aware consciousness. The difference with people is that we can *reflect* on our states of consciousness, just as you just did reading the dream exercise and remembering a dream. This self-observation of interior states is a human superpower. Simple awareness regulates and changes states. Mindful self-awareness—compassionately observing yourself in a state—can regulate and self-correct at warp speed. Self-correcting towards more compassion and deeper consciousness dramatically accelerates human development.

Defensive states and states of healthy response to the present moment

Two kinds of states dominate our waking existence, states of healthy response to the present moment and defensive states:

- A typical state of healthy response to the present moment is being secure, present, flexible, and adaptive in dealing effectively with the world. With another person, a state of healthy response usually involves feeling positively and/or appropriately engaged, and able to work with each other to solve problems or correct miscommunications.
- A defensive state (as we discussed in Chapter 2) involves feeling threatened in some fashion, which cues amplified or numbed emotions, distorted perspectives, destructive impulses, and diminished capacities for empathy and self-reflection.

Much of psychotherapy is helping clients identify defensive states and regulate them into states of healthy response. This is especially important in trauma work since trauma learning invariably shows up as different forms of defensive states.

Therapist sidebar: *Think about any recent session you conducted with an individual, couple, family, or group. How often did you attend to, interrupt, or challenge someone who seemed to have amplified or numbed emotions, distorted perspectives, destructive impulses to fight/flee/freeze/fawn, or loss of abilities to empathize or self-reflect? When you interrupted, weren't you specifically encouraging them to have proportionate emotions, accurate perspectives, prosocial impulses, and more robust empathy and self-awareness? This was you engaging in one of the foundation practices of psychotherapy, encouraging people to shift from defensive states to states of healthy response to the present moment.*

States in the four stages

We are dealing with states of consciousness throughout all four stages of trauma treatment, for better (healthy response) or worse (defensive states).

Here's an example of a traumatized young mother working her way from drowning in toxic defensive states to cultivating healthy positive states.

Cheryl was a 31-year-old mother of two small children who had fled two years previously from her physically, sexually, and emotionally abusive husband Sam. He had bullied, beaten, and raped her since they had married at 18, when she believed marrying Sam would rescue her from her alcoholic father and emotionally abusive mother. As the children were born and Sam accelerated his drinking and abuse, she felt helpless to change. Her trauma conditioning was to dissociate and become passive and numb when challenged or attacked—a helpless and powerless state of consciousness. What finally empowered her to leave was discovering that Sam was molesting their five-year-old daughter Jamie.

When we first began working together, Cheryl would shut down as soon as we began discussing any of the abuse. When she focused on a memory, the painful emotions amplified and the shameful meanings she believed about her staying too long with Sam became extra dark. In the first stage of our trauma work I focused on helping Cheryl feel safe enough to gradually revisit the memories and feelings. I suggested that it was better to feel the feelings and be aware of the shameful meanings, but also notice how the feelings were amplified and the beliefs were distorted unfairly too far to the negative.

Here's a typical exchange:

Keith: “What do you want to focus on today, Cheryl?”

Cheryl: “On what a horrible mother I am for not leaving sooner! I can’t believe I kept staying, day after day, year after year!” At this point she would often look away and space out unhappily, not particularly available for conversation.

Keith: “Is there a particular memory or event that you’re remembering right now?”

Cheryl: “There was one night he was drinking and I was making too much noise in the kitchen. He came in and told me I’d better shut up or he’d smack me.”

Keith: “You’re gripping the chair pretty tightly right now. I’d be angry and frightened if Sam said that to me.”

Cheryl: Looking up and making eye contact, “It was wrong for him to treat me that way.”

It took months for Cheryl to be able to move through the first stage of trauma treatment—remembering and discussing the episodes, feeling the anger and fear, but staying current and regulated in the session with me. Using attentional tools like attunement, EMDR, dual-focus, receiving influence from me and other caring people, and self-support, she began to both feel the emotions and regulate them to more realistic and tolerable levels.

A typical exchange at this point was:

Keith: “What do you want to focus on today, Cheryl?”

Cheryl: “On how *angry* I am at Sam! I was talking to another mother at school who seems to have a nice marriage, and I just felt rage at what a complete asshole Sam always was!”

Keith: “What would you tell him if he was here right now?”

Cheryl: “I’d tell him he’s a jerk and I’m never going to let him hurt me or the kids ever again!”

At this point, Cheryl still felt bad about staying, but also felt proud of leaving immediately when she discovered Sam was molesting Jamie. She didn’t numb out or disappear anymore when we discussed the abuse—instead she had more proportionate and appropriate feelings.

This led us into the second stage of understanding her heroine’s journey as moving from survival mode in dangerous alcoholic systems (like her family of origin and her marriage to Sam) to creating a healthy family now with her two children in a nurturing environment.

Keith: “These days you seem to get how you had to step up and be different for yourself and the kids.”

Cheryl: “It was the hardest thing I ever did to leave—I was so frightened! But I did and I’m proud I did.”

Even as she recognized how extraordinary and courageous her journey to freedom had been, Cheryl continued to have periods of depression, worthlessness, and extreme anxiety. These were no longer centered on any particular sets of episodes or historical events, but instead were more habits of consciousness—unpleasant *states* she was sick of suffering through. As this became clearer, we began to focus more on the third stage of trauma work, choosing healthier states.

Practices

Focusing specifically on creating better states of consciousness usually requires practices—regular conscious efforts that direct thoughts, feelings, and actions into positive forms. This has the effect over time of replacing bad habits of feeling/thinking/doing with good habits of feeling/thinking/doing.

***Neuroscience geek sidebar:** Interestingly, neuroresearch in the last thirty years suggests that old bad defensive habits don’t completely disappear when we create better habits, but instead, just as old bad habits begin to be triggered, new good habits take over—habits that have been installed to replace them.⁵¹ Why is this?*

- *Each time we practice the new habit, special cells in our brain called oligodendrocytes myelinate the new circuits, adding layers of fatty myelin to them which makes them faster and more robust. The more myelinated a circuit, the more the brain chooses that one*

over others. Other defensive circuits don't disappear, they gradually deteriorate as they are not used, and the brain chooses the new circuits, many of which apparently reside primarily in the self-regulatory parts of our frontal cerebral cortex (especially our right frontal cerebral cortex).

- *The implication is that our limbic areas never give up a response that's associated with defense but can develop self-regulatory cerebral-cortical circuits to modify old defensive habits to the extent that they feel like they're gone.⁵²*

Practices can induce emotional states

Besel van der Kolk, perhaps my favorite teacher and practitioner in the trauma field, maintains that it is difficult to impossible to direct yourself into new emotional states. I agree it's difficult, but also believe we can all change emotional states using our human superpowers of focused intent and action, in service of principle, and driven by resolve—in other words, *practices*. The following is how I taught Cheryl a practice I learned from the HeartMath system developed by Doc Childre⁵³:

Cheryl: “I know the traumas are behind me, and I know that I was brave enough to find a way out for me and the kids. I still have these moments where I get this rush of shame and think, “You kept them in that horrible house too long! You've wrecked your children! I know that's not right, but I still have these surges of shame. I don't know what to do!”

Keith: “What have you tried?”

Cheryl: “I tell myself I did the best I could. I remind myself that Sam in a crazy alcoholic and I'm not. I *know* I'm a good mother for my kids now, but I still have those moments.”

Keith: “I'm going to teach you a practice I learned from HeartMath. You have a bad habit of feeling shame and judging yourself, even though you know better. I think you need to practice a new state when that shame/blame state shows up.”

Cheryl looks up hopefully: “OK.”

Keith: “What’s something or someone you are really grateful for, and where do you feel the gratitude in your body?”

Cheryl: “That’s easy! I’m grateful for my kids, Jamie and Jason. I’m grateful they exist and are safe and mostly happy now. I feel this warm grateful feeling in my chest and solar plexus.”

Keith: “Great! First, take three deep breaths. Inhale through your nose slowly and softly, and breathe out slowly and softly through your mouth for around ten seconds.” Cheryl does this and visibly relaxes. I continue, “Now focus on being grateful for Jamie and Jason existing and being safe and mostly happy. Feel the gratitude in your chest and solar plexus area. Nod to me when you are solid in that feeling.” Cheryl nods. “Now sustain that feeling of gratitude in your chest for thirty seconds—I’ll tell you when the time is up.”

I watch Cheryl closely as the seconds tick by, noticing how her face becomes more serene and her body becomes more relaxed. After thirty seconds I tell her, “Times up. What are you experiencing right now?”

Cheryl: “I feel grown up and grateful for the kids and for me getting us out of that crazy house!”

Keith: “I’d like you to do this exercise before every meal, and every time you begin to get guilty, ashamed, or self-doubting. This new habit of gratitude for the kids and for you courageously leaving will eventually supplant the old self-doubting habit, but you need to practice!”

Cheryl: “I will!”

Maintaining a practice and the Asanga Elephant path

Cheryl tried the practice for four days and then stopped, even though she enjoyed the feelings the practice generated. She needed to be encouraged

and reminded by me in subsequent sessions to continue the HeartMath when she entered one of her habitual negative thoughts/feelings states. It's hard to maintain a practice! We resist change, and especially resist being different when we feel bad. If we persist (focused intent and action, in service of principle, and driven by resolve), we eventually find ourselves naturally engaging in the new good habits, supporting new more healthy states of consciousness.

To encourage people to keep practicing a new state, I sometimes tell them the story of the Asanga Elephant method. In fourth century India there lived a Mahayana Buddhist monk named Asanga. He said that training the mind is like training an elephant. When you ride the elephant and it goes in the wrong direction, you goad it into the right direction. Training your mind is anchoring it in the seat of mindfulness (or attunement) and directing it into the right direction with conscious intention when it strays.

Feeling, Story, Moral Stance

You'll notice from my example with Cheryl, her distressed state is not just a feeling, but a story and a moral stance. She feels shame, has a story of her failing her children by staying with Sam so long, and a moral stance of being a bad mother.

The gratitude practice involved a feeling of gratitude, a new story of her overcoming overwhelming pressures to save herself and her kids, and a moral stance of her courageously doing the right thing in the presence of fear and self-doubt.

States always involve emotions, stories, and moral stances. When you cultivate a new, healthy state, it needs to have an accurate positive story and a virtuous moral stance that generates positive emotions like gratitude, joy, love, triumph, curiosity, awe, or spiritual transcendence.

Choosing a practice requires lots of reflection

I had to remind Cheryl to do her gratitude practice many times. I've found this often to be the case when teaching practices—most

techniques are easy to learn, but hard to keep doing day after day, week after week, and month after month.

It's helpful to remember that daily mindfulness practices like the attunement process we explored in Chapter Two have been demonstrated to *change brain structure* in as little as eight weeks. Part of what makes consistent practice difficult is that it's hard to feel yourself becoming gradually better at self-soothing, non-reactivity, and compassionate understanding, even while you are gradually improving these traits. I think of learning new practices as similar to not eating doughnuts in the morning when your coworkers always bring in doughnuts. If you avoid eating the doughnut this morning, your body doesn't look any different this afternoon, but if you avoid eating them for a year, you probably are much healthier!

Another complicating factor of consistent practice is that our brains automatically work to maintain the illusion that we are always the same person with the same values, even though our sense of self and our values shift radically from state to state as well as from developmental stage to developmental stage. I'll bet you feel like the same person you were when you were fifteen, but I guarantee you feel, believe, and think in radically different ways than that teenager. You probably feel like you've been the same person all day, but weren't you at least partly a different person when you rolled out of bed, to when you were dealing with your spouse and kids, to who you were at work, to who you are driving down the road? We change states all the time, but our brains give us the illusion that we are always the same person.

My friend Jeff Salzman, with whom I do a series called *The Shrink and the Pundit* on his *Daily Evolver* podcast⁵⁴, once told me, "We don't do practices to be successful, we do them to be faithful." I agree with him and spend a lot of time determining with my clients what practices they believe in enough to be faithful to. Cheryl believed in the HeartMath gratitude exercise, and even asked me to recommend which of Doc Childre's books she should read. This faith and interest in the approach helped her to continue cultivating gratitude, especially when her shame/

self-punitive states were triggered. The bottom line is our Shadow-selves want to create new healthy habits to provide growth and relief, but also *resist* creating new healthy habits because old habits were originally solutions to problems and our adaptive unconscious resists giving up old solutions. What can we do about this resistance, especially in the third stage of resolving trauma when the focus is on creating new good habits of consciousness to supplant old unhealthy habits of consciousness? Let's start with how to choose a new habit.

Choose a practice exercise: *Go back over your journal and check any practices you wrote about, tried, or considered since you began reading this book.*

- *Which ones felt particularly useful to you?*
- *If you were looking back on your life a year from now, which practice(s) would you be most happy you did regularly over the last year?*
- *Imagine you did this practice regularly for a year. When during the day was the practice best for your joy/love/health?*
- *How does it feel to imagine yourself a year from now looking back and successfully engaging in this new habit? How are you different from doing this practice for a year? Write about all this in your journal.*
- *In your imagination, how did you remind yourself to do the practice? For instance, I suggested to Cheryl that she do the gratitude practice when she began to feel ashamed and worthless and before each meal. What prompts did you use the practice in your imagination? Every day at 8:00 am? Any time you started driving your car? Every time you felt angry? Sad? Anxious? Ashamed?*
- *Are you willing to begin the practice—like attunement, gratitude, or identifying defensive states practices—that you just wrote about?*
- *If so, how will you remind yourself to do it? What will be your prompt?*

In the third stage of trauma work, don't let yourself habitually focus on and elaborate painful thoughts, images, or memories! Focus on your breath and body in the present moment.

Focusing on breath and body in the present moment is a universal practice of most spiritual/psychological systems and traditions. We can direct our attention, and this is a superpower! For example, remember the last time you were embarrassed. See if you can remember as many sensory details as possible—images, sensations, feelings, tastes, textures, etc. Got it? Embarrassing memories tend to be emotionally charged, so you should be able to recall some vivid moments and feel a little embarrassment—a shame emotion.

Now focus on breathing in and out from your nose to your abdomen slowly and softly. Sometimes it helps to imagine you have a mouth three inches below your navel and you are breathing in and out through it. Do this five times, counting as you breathe and focusing on *the sensations in your body* as you do this.

Notice how the embarrassment fades or disappears? We have a human superpower of directing thought and attention, and when trauma takes us away from *now*, we can direct our attention to being fully present, in our bodies, using this simple breath technique.

Breath exercise: *Practice the breathing in and out from your abdomen for five breaths five times a day. Especially do it any time you feel too excited, distracted, or distressed to be fully present in the moment. Each night for three nights, write in your journal about what you noticed doing this.*

Tiny habits

Stanford professor B.J. Fogg has developed an amazing system for creating new habits called *Tiny Habits*.⁵⁵ I highly recommend his book, *Tiny Habits*, which is a goldmine of strategies for positive change. I'm going to briefly describe his system as it applies to Cheryl wanting to learn the gratitude exercise and how the Tiny Habits approach might apply to you in successfully embodying new healthy practices.

Choose an aspiration that matters to you: In the previous Choose-a-Practice exercise I suggested you find a practice from the ones offered in the book and imagine successfully engaging in it for a year. I asked you to choose one which lit you up with joy and excitement—where it was exciting to you to imagine doing it consistently for a year. Cheryl desperately wanted to experience herself as a good mother doing right by her children, and the gratitude experience filled her with hope and positive beliefs about herself.

In the practice you choose, what is one *specific* behavior you need to do to start it? For instance:

- If you want to use a kind tone with your 12-year-old son when he yells or defies you, a good first step is taking a slow, deep, soft breath while reminding yourself he is a distressed child.
- If you want to exercise more, a good first step is doing two pushups against the wall every time you get up from your desk or couch.

The hardest part of learning a new habit are the first few seconds. When you can consistently shift *just to the beginning* of a new habit, you've already done most of the heavy lifting.

Start small and fast: We are more likely to do something we feel is easy and fast. Two pushups against a wall are easy, while thirty on the floor are hard—at least for me! Fast means *fast*—thirty seconds or less is optimal, with 10 seconds being a good place to start.

- I suggested to Cheryl she focus on her children, her gratitude, and her courage to change for a few seconds initially, and then thirty seconds as she became more accustomed to the state.
- If you want to practice attunement, you might start with just focusing on your sensations and emotions with acceptance and caring intent for ten seconds. As that becomes more effortless, you can add focusing additionally on thoughts, judgements, and desires.

- If you want more compassionate understanding, you might focus on finding one valid thing about a person or situation that irritates you—*especially at the moment you are irritated*.

We need prompts: We don't do a new behavior unless there is a signal to do it. This can be a feeling/state (like Cheryl feeling worthless), a person (do the practice when you see your child after school), or a context (do the gratitude exercise when you get out of bed).

- Pick a feeling, state, person, or context that would make it easy for you to remember to start your new tiny habit. The prompt needs to occur frequently enough so that you will practice at least several times a day.

Always celebrate immediately: As soon as you complete the first iteration of your tiny habit, reach for a sense of accomplishment, even triumph, in your body. To celebrate a tiny victory, you need to feel some pleasure physically in your face, head, chest area, stomach, abdomen, or skin. Just as in receiving compliments from another person, pleasure lets you know you have registered the positive experience.

- When Cheryl did the gratitude exercise, she felt a warm sense of accomplishment in her chest and face.
- Whenever you finish doing *your* new tiny habit, briefly reflect on your positive effort until you feel a little pleasure in your body. This pleasure is a celebration (a positive reinforcement in behaviorist terms), and a necessary part of lasting change.

Changing states needs intention, but not necessarily reflection

Once you start doing your tiny habit, you don't have to pay much more attention than simple awareness of the prompt, the practice, and the pleasure. You don't have to decide, you don't have to reflect, you just do the practice. Healthy practices create their own attractor states (states we naturally activate in different contexts) for reflection and insight to arise spontaneously.

As Cheryl did the gratitude exercise, she noticed herself feeling a little more confident of her worth and strength, but also noticed some

incidences where she resisted the exercise, especially when she made mistakes, such as speaking harshly to the kids when they were fighting. This awareness arose naturally out of doing the practice and provided direction for further work in our sessions.

Sometimes practices are harder because of who we are

As we explored in Chapter 2, we all have resistances to change, and we all have various tendencies to be normal crazy or extra crazy in different situations. One of the five foundations of the Integral system of Quadrants/Levels/Lines/States/Types is *types* (see Appendix 1 for more on Integral). Each of us is a unique type of person, and all of us are combinations of different traits, habits, strengths, and weaknesses. Certain traits make change easier, and others make change harder. For example:

- **Compassionate self-awareness makes change easier:** In the attunement exercise, the focus is on awareness of sensation/emotion/thought/judgement/desire with *acceptance and caring intent*. Compassionate self-awareness can look at strengths, weaknesses, mistakes, and triumphs with interest and a growth mindset—the mindset that effort and progress on any dimension is what is more important than outcome or appearance. Growth mindsets are associated with success, happiness, health, and superior relationships.⁵⁶
- **Receiving caring influence from others makes change easier:** The more we can hear caring influence and act on it, the faster we grow. This varies wildly *between* individuals and *within* individuals. For instance, my wife Becky only had to tell me once to wipe the sink with a dry sponge after doing the dishes, and I've done it ever since. She's had to remind me many times to turn the light off after breakfast, and I still forgot to do it today. My one saving grace on the light is I will continue to notice when I forget (awareness regulates and I have a growth mindset), and I will eventually turn it off every time (I promise!).
- **Blaming others makes change harder:** When you make a mistake, or something goes wrong, do you immediately look for your responsibility and contribution to the problem, or do you look

for someone to blame or an excuse to make you not responsible? If you deny mistakes and blame others, you will grow more slowly, because you probably have more of a fixed mindset—the mindset that any flaw or mistake is shameful and that if you aren't doing well or being perceived as doing well you are a less worthy person.⁵⁷

If you resist caring influence, blame others for mistakes, have a fixed mindset, or have trouble with compassionate self-observation, it doesn't mean you are a bad or unworthy person! It simply means that your current type of person will need extra effort in self-awareness and self-correction to grow in these areas. If you are working through a trauma, this extra effort will probably be necessary for you to feel like you're living a happy ending at the beginning of something wonderful. What kind of extra effort? Start with a tiny habit!

The Awakened Brain

In *Chapter 3: The second stage—growing our life stories*, we talked about the Hero's Journey and the importance of understanding traumas as ordeals we must face in a heroic life story. The subjective sense of feeling yourself progressing on your Hero's journey is often a pleasurable sense of being involved in something larger than yourself, something sacred. As we discussed in the Introduction, trauma is never a preferable way to grow, but to resolve and integrate trauma we usually need to feel wiser and stronger on the other side. This “wiser and stronger,” experience often feels spiritually charged, as if something sacred is involved.

Dr. Lisa Miller has dedicated her life to understanding the neurobiology of spiritual transcendence and applying that understanding to helping people grow and thrive. She's found that when people are in a transcendent state—feeling a sense of connectedness with the sacred—they feel *loved, held, guided, and never alone*.⁵⁸

Dr. Miller found that four brain areas were involved in a sense of transcendence, and she has developed practices that help activate those

areas to reliably create states of transcendence in literally millions of people (the U.S. Army incorporated her work in their Spiritual Readiness Initiative).⁵⁹

I've taught her practices to many of my clients, and I'd like to end this chapter on choosing healthy states by suggesting my favorite of hers—the table exercise:

The table exercise: *Breathe in and out slowly and softly through your nose down into your abdomen. Do this for three breaths.*

- *Imagine you're sitting at a table, and across from you are your wisest guides, both real and imagined. It could be your seventh-grade chemistry teacher, Gandalf from the Tolkien trilogy, Yoda, your father or mother, your best friend, or anyone else you feel is wise and caring.*
- *Look these people in the eyes and ask them, "Do you love me?" and watch their responses. How do you feel as they respond?*
- *Add your Wise Self to the group. This is the part of you who is deep, loving, connected to Spirit, and always has your best interests at heart. Look into your Wise Self's eyes and ask, "Do you love me?" and be aware of how you feel as they respond.*
- *Still seeing your guides and your Wise Self sitting across from you, add a representation of spirit. It could be Christ, Buddha, an energy vortex, or some other personification of Unity and Love. Look at this figure and ask, "Do you love me?" and be aware of how you feel as they respond.*
- *Ask all of them, "Is there any feedback or advice any of you would like to give me?" If so, just attend to the message. If not, no problem.*
- *How are you feeling as you do all this? I always feel held, loved, guided, and never alone when I engage in these practices.*
- *Write about your experiences, including how you feel in your body when "Do you love me?" is answered.*
- *Share what you've written with someone you trust.*

According to Dr. Miller's research, people have a craving to feel spiritually connected and that craving becomes more intense in late adolescence. When I've taught this practice to young adults, they generally have that feeling of being loved, held, guided, and never alone. Some have continued the practice.

We have superpowers of focused intent and action, in service of principle and driven by resolve. Using these powers, we can direct our thoughts and actions in ways that generate virtuous healing states of consciousness. In the third stage of trauma work, we identify unhealthy states and replace them with healthier states. As we do this, we teach our deep unconscious, our Shadow-selves, new meanings, feelings, and identifications about ourselves. If we activate these states consistently enough, our Shadow-self starts activating them for us, and we have transformed and grown into better self-regulators and self-transcenders.

For example, I've been doing the gratitude exercise for decades now, and generally walk through the world feeling grateful. I notice when I'm not feeling grateful and adjust—either consciously or reflexively—to feeling grateful again. I feel grateful for this practice as I write this.

And now...

Often when we've worked through the first three stages of resolving trauma, we feel whole, stronger, and on the road to living a happy ending at the beginning of something wonderful. But life is not just about being resolved and happy right now. The world continues to bring us challenges and ordeals. The past continues to influence us with resilience memories and trauma memories—often unexpectedly. This leads us to the fourth stage of trauma work: *Be the Compassionate Witness and Let Wise Self call the Shots*.

Chapter 5: The fourth stage: Be the Compassionate Witness and let Wise Self call the shots

The fourth stage of Integrating trauma is learning how to maintain compassionate awareness of ourselves and others as we navigate the world, plus increasing our willingness to address any imbalances that arise in the messy processes of life. Ideally, we observe imbalances—physical problems, social problems, unfulfilled yearnings, unresolved traumas, or anything else—and address them. We take responsibility for our part of problems and receive caring influence. If trauma intrudes, we work through the four stages towards transcendence.

What I just described requires:

- Compassionate self-observation.
- A Wise Self—some interior sense of what serves the highest good in any given situation.
- A willingness to receive and embody caring influence. Receiving and embodying means acting on new knowledge to grow. Lao Tsu in the Tao te Ching says, “To know and not to act, is not to know.”⁶⁰

Compassionate self-awareness is harder than it sounds. Maintaining an interior sense of what serves the highest good and receiving and acting on caring influence requires an awareness that what we know and do are always just our current best understandings. There are always better understandings ahead, but often it’s difficult to embrace them because we resist change. On the other hand, we are all able to get better at compassionate self-awareness *if we choose to receive caring influence*.

Let’s move deeper into compassionate self-awareness. First of all, what’s the difference between self-observation and *compassionate* self-observation?

Self-observation is a human superpower; compassionate self-observation is that superpower on steroids

Everyone self-observes. We have ongoing awareness of ourselves managing life from waking to sleeping, and then some sense of navigating our dreamscapes during sleep. This is such a natural power that we don’t even notice it most of the time. Central to self-observation is self-judgment. Do we feel OK? Do we feel effective and virtuous? Do

we feel ineffective, embarrassed, guilty, or ashamed? All of these emotions and capacities show up in the different states we cycle through during the day.

Compassionate self-awareness is another level of awareness—a particular kind of awareness of awareness. Whether self-observing success (with either pleasure or embarrassment) or failure (with either shame, anger, or acceptance), compassionate self-observation looks for the deepest truth and the highest good with a subjective sense of “I am a good person observing myself navigating life as best I can, and I can always get better at everything.” Inherent in compassionate self-awareness is self-correction towards healthier beliefs and actions.

Self-awareness practice: *What are you feeling in your right foot at this moment? Try wiggling your toes. How does it feel to wriggle your toes? You are self-observing your right foot!*

Can you remember the last conversation you had with a friend or your life-partner? What did you say and do, and what did he or she say and do? What were your sensations, emotions, and judgments during this conversation? You are self-observing your past!

When is the last time you made a mistake? How did you feel when you noticed the mistake? How did you process the mistake? Did you notice it right away? Did you take responsibility for your part of the problem and decide to do better in some way (self-correct)? Did you initially deny the mistake, or begin to blame it on someone else? Does this self-observing feel different than how you felt paying attention to your right toe or remembering your last talk with your partner?

Write in your journal about the differences in these three self-observations.

Try having compassionate understanding of your mistake experience. Look for how you took responsibility or refused to take responsibility, and how you prefer to be in the world. If you'd like to grow from the

experience, what are your take-away insights and resolves that will empower you to change in the future? Write about this in your journal, and then share it with someone you trust.

Let's unpack the key components of the fourth stage of trauma work using Nancy and Frank from Chapter 1 as an example. Nancy worked the first three stages and eventually got back to a mostly satisfying friendship and love affair with Frank, but occasionally she'd lose sight of herself jumping down distress rabbit holes when triggered about the affair. Frank still occasionally shut down in the face of Nancy's anger and would passive-aggressively rationalize his affair with Cristi (though he knew enough to not share his rationalizations with Nancy!).

Nancy and Frank both struggled with the fourth stage of trauma work. They had plenty of self-awareness—which was great—but needed to work hard for *compassionate* self-awareness.

Nancy eventually stopped attacking Frank when she had memories of one of his lies or infidelities, but then began attacking *herself* when she felt bad. Here's a typical exchange:

Nancy: "I believe he's faithful and much more present than ever before, but I still start blaming him when I get any minor trigger. I get so mad at myself!"

Keith: "How do you mean, 'Mad at yourself?'"

Nancy, forcefully: "I want to stop being so angry!"

Keith: "You sound pretty frustrated." Nancy nods and I continue, "Can you view your angry, frustrated self with some compassion right now? Frank has stepped up admirably, but you went through Hell, and it takes time to learn to soothe that defensive angry side of you who was so activated during the trauma."

Nancy's face softens: "Yes! It was Hell, and I have made huge progress feeling happy to be with Frank and our family again."

Keith: "It sounds like you have more compassionate understanding of yourself right now. How does that feel?"

Nancy: "Much better, but I keep forgetting!"

Keith, laughing, "Now you're frustrated again for not growing faster! You might want to create a tiny habit of reaching for compassionate understanding when you feel that rush of anger or frustration."

Nancy, laughing with me, "I can do that. I will do that! But I guess it takes as long as it takes."

Keith, admiringly, "Now that's what I call compassionate self-observation!"

Wise Self

We all have a Wise Self—a mature loving self. If you did the exercise at the end of the last chapter, you have seen your Wise Self across a table as you ask, "Do you love me?"

Wise Self exercise: *Relax, breathe deeply and softly in and out through your nose and imagine your Wise Self in front of you, in whatever form that works for you—a person, an entity, a figure from myth or fiction, or any other self-form that arises.*

- *Look at this Wise Self as you ask, "Do you love me?" and feel the answer.*
- *Ask, "Will you help guide me?" and feel the response.*
- *Imagine yourself being Wise Self answering the question. See your current self with Wise Self's eyes. Address your current self with Wise Self's consciousness.*

I suggest you write in your journal about what just happened and how you felt as you did this exercise. Afterwards, talk about your experience with someone you trust.

If you have a little conversation with your Wise Self every day, Wise Self becomes a normal part of your life. You can ask Wise Self for input, and then imagine yourself being Wise Self responding. You can write these conversations in your journal. This is a big deal! Caring inner guidance is priceless. Whenever I've checked in with Wise Self, things have gone better, and never worse.

Observing ego

Ever since Freud came up with his ideas about ego/id/superego, psychologists have been talking about the “Observing ego.”⁶¹ Over the years, psychoanalysts noticed how being self-aware of feelings, thoughts, behaviors, and judgments generally marked improvements in their patients—people could self-correct before they acted on poor judgments and could more deeply understand their own motivations and biases.

They also noticed that self-awareness with distorted perspectives, felt helplessness, or moral condemnations often created *more* problems for their patients. Depressed people were over-vigilant for signs of weaknesses, flaws, and mistakes, and felt powerless to address their misery. Anxious people amplified real and potential dangers, often to the point of immobility or panic. Paranoid people observed themselves being the objects of imagined attacks and plots. It seemed that simple self-awareness wasn't always enough to help people grow. They needed an added level of processing to have self-awareness be beneficial. Freud called this added capacity, “Reality testing,” believing that people could use psychoanalysis to learn to tell the difference between distortions and objective truth, and between appropriate and inappropriate emotional reactions. Alfred Adler, a contemporary of Freud (who banished Adler from psychoanalytical circles for disagreeing with some of Freud's theories), maintained that health was having a sense of agency (personal

effectiveness) in a world where people felt like comrades rather than threats.⁶²

As we psychologists have learned more about how people, relationships, and brains work, we've expanded our understanding of the Witness or Wise Self. This has been especially helped by the increasing cultural interest in meditation and mindfulness. In my book, *Integral Mindfulness*, I suggest a core self-awareness practice of Attunement⁶³ (which we practiced in Chapter 2), which involves self-observing breath, sensation, emotion, thought, judgment, and desire *with acceptance and caring intent*.

Self-awareness with acceptance and caring intent is *compassionate self-awareness*—the gold standard for self-observation. Compassionate self-awareness personified (as you experienced earlier in the table exercise) is the Witness, the Wise Self.

Why can't I be in touch with Wise Self all the time?

First of all, the Wise Self is always there! Vajrayana Buddhists say that enlightenment is always shining forth but becomes obscured by the clouds of mental constructs.⁶⁴ Wise Self is always present! I personally think that Wise Self takes shape in our nervous systems between three and six. This explains the occasional shockingly insightful pronouncements from a child. They have an emergent Wise Self which will become more or less available as they continue their individual developmental journey.

On the other hand, we have many forms of memory, and the brain has included and transcended defensive drives that stretch back to the very first life on earth. If our Shadow-self, our adaptive unconscious, determines we're threatened, it will instantly put us in a defensive state where we are not empathizing or self-observing, we are *defending*. Such defending is a core instinct that can be refined into more sophisticated self-observation and self-regulation, but it is *extremely difficult* to self-observe when your nervous system is demanding that you "Defend now!"

How do we improve connecting with our Wise Self? First of all, practicing some form of attunement—observing yourself with acceptance and caring intent—daily will literally change your brain. Within weeks of ten minutes a day practices you are strengthening self-regulatory circuits that extend from your brain’s frontal cortex into your emotional/relational limbic mid brain. But this is not enough to have access to Wise Self in threatening situations! We need to remember to reach for Wise Self *when we are upset and don’t feel like it*. Checking in with Wise Self when we feel threatened is a superpower that improves with practice but requires *lots of practice*.

Frank started practicing attunement early in our work and immediately saw benefits from checking in with his Wise Self. He grew increasingly frustrated that his Wise Self disappeared when he saw signs of anger in Nancy. When she got mad, all he could think of was getting away or calming her down. He asked me about it one time:

Frank: “How come I can’t do the compassionate understanding thing when Nancy’s mad?”

Keith: “What happens inside you when you sense she’s mad?”

Frank: “I tense up and think, ‘I hope she doesn’t go into a rant about the affair!’”

Keith: “What do you do?”

Frank: “Duck and cover! I apologize and try to get away.”

Keith: “What do you think would serve the highest good at that moment?”

Frank looks thoughtful and pauses, which is a good sign. He’s now using his imagination and Wise Self to try and create a better response than duck and cover: “I think I need to take a deep breath, tell her I love her,

and ask , ‘What can I do right now to help you feel better?’ You suggested that a month ago, and it worked great the one time I tried it.”

Keith: “What do you think stops you from remembering to do it more consistently when Nancy gets upset?”

Frank: “I don’t know, but I want to remember and do it more often!”

Keith: “That’s great you want to do it more! Self-soothing and checking in with Wise Self when you feel threatened is the hardest time to do it but is usually the most beneficial time to do it. What does your Wise Self think you should do to remember?”

Frank starts to laugh: “It sounds weird, but keeping a card in my pocket with, ‘Take a deep breath and ask, ‘What can I do right now to help you feel better,’ is what comes up.”

Keith: “I trust your Wise Self! Do you want to write the card right now?”

Frank: “Sure! Good idea!”

Some of the simplest practices are the hardest to do consistently, and especially when we are emotionally distressed and impulsive. Self-soothing followed by checking in with Wise Self is a super-power! It keeps getting stronger with daily meditation and consistent practice in clutch situations *when we initially don’t feel like doing it.*

Self-soothing and checking in with Wise Self exercise: *I suggest you sit down with your journal and take three deep, slow inhalations and exhalations through your nose. As you continue to breathe slowly and softly in and out through your nose, imagine your Wise Self inside you and ask, “What can I do to serve the highest good right now?” Write whatever comes to you.*

Try doing this exercise daily for the next two weeks and write about your experiences in your journal.

At least once do this exercise when you are scared or angry, and then write about how it went.

After two weeks, read what you've written and share your experiences with someone you trust.

The fourth stage is about coordinating your life with your compassionate Witness, your Wise Self. If past or current traumas intrude, if you have conflicts with anyone, if you aren't as resilient as you'd like in some area, or if you experience any other disharmony (as inevitably happens in the myriad ongoing process of life), you can check in with your Wise Self and ask, "What can I do right now that would serve the highest good?"

But what if I can't compassionately self-observe? What if I can never remember to check in with Wise Self when I'm upset?

These are the million-dollar questions! Every psychotherapy, every self-help book (including all of mine), and every coaching/change/consulting system struggles to answer these two questions. Here's the good news and the bad news.

The good news:

- All of us can learn to compassionately self-observe and check in with Wise Self when distressed.
- *Any of us* can become a master of compassionate self-awareness, with Wise Self a normal and constant presence.
- There are numerous practices—many in this book—that can help you develop Wise Self.

The bad news:

- When our Shadow-self, our adaptive unconscious, reads threat, it instantly creates a defensive state that wants to protect us *now*, and resists compassionate self-awareness. Remember the

characteristics of a defensive state from Chapter 2? Amplified or numbed emotions, distorted perspectives, destructive impulses, and diminished capacities for empathy and self-reflection? Under threat the instinctual brain wants action *now!* We can teach our adaptive unconscious to immediately reach for compassionate awareness under threat, but it means including and transcending our more primitive reflexes to defend into more complex and evolved reflexes to serve the highest good. This sometimes requires *years* of conscious effort.

- Some of us have more problems developing a compassionate witness than others. It might have been relatively easy for you to do the Wise Self exercises or somehow impossible. We all have blind spots, and some of us have powerful habits of defending and avoiding blind spots. If it was difficult or impossible for you to connect with your compassionate witness, it might help to find a therapist, teacher, or coach to work with you on developing your Wise Self.

Blind spot exercise: *Sit comfortable with your journal and breathe slowly and softly for around thirty seconds.*

- *Send your attention to any relationship or situation where you have a chronic problem. It might be arguing with your son, feeling resentful of your wife, drinking too much at parties, or being unable to get off the couch and do something productive. It might be an inability to soothe yourself when you have a trauma memory. You might have the bad habit of refusing to ask for (or receive) help when you need it. Write about this chronic problem in your journal.*
- *How do you typically act when this problem is happening. Chronic problems usually involve the same strategy, even though it hardly ever works. A good example of a chronic problem with a bankrupt strategy is repetitive escalating conflicts, where two people regularly begin with a disagreement and then both proceed to get more frustrated and less receptive until nothing is solved, and damage has been done. What is the mode you go into when your chronic problem occurs? Do you blow up, blank out, take off, lie*

and hide, collapse, go along, or take over? Write about your typical strategy in as much detail as possible.

- *Do you have any access to your Wise Self, the compassionate witness, when this problem happens? Write about your connections and disconnections with Wise Self during the problem.*
- *What is your part of this problem? What are you doing (or refusing to do) that contributes to this problem? For instance, in an escalating conflict both people are cooperating in a toxic dance. Write about your contribution.*
- *What are you willing to do differently the next time this problem occurs? Are you willing to try some new tactic that will give you a chance of a better outcome? Write how you could do this new approach.*
- *On a scale of 1 to 10, with 1 being there is no way you will be different next time and 10 being you absolutely will try a new, more potentially successful strategy next time, what is the likelihood you will try the new strategy next time? 2? 4? 9? Write about it in your journal, and especially how you feel about the number you chose.*
- *Read everything you just wrote and look for blind spots. A typical blind spot is not noticing that you only have one unsuccessful option when you argue, feel injured, or have a trauma trigger—for instance you stop listening, continue making your point, attack, or change the topic; all without recognizing how counterproductive your response is. A blind spot is having no clue what your contribution is to a problem, while having lots of excuses and reasons to blame others. Write about any blind spots you can observe while doing this exercise.*
- *Share what you've written with someone you trust. Afterwards, ask them if they can see any blind spots in you. If this causes conflict or confusion for you, find a therapist and share all this with him or her.*

I used to have a blind spot of using a contemptuous tone and hostile logic when I was mad at my wife Becky. She initially complained about me being, “Angry,” which fed into a further blind spot of accusing her of wanting me to be “Inauthentic.”

One night I noticed that I was being mean and I felt ashamed for hurting her—a good sign! My shame meant that my unconscious had finally accepted that it was wrong to treat her badly (she is an extraordinarily good person, but it’s never a good idea to treat anyone badly!). After that, when Becky asked if I was mad about something, I’d tell the truth, yes or no, but always add, “If I’m mad at you, it’s my problem.” I wanted her to know that she was always safe with me.

This insight of embracing radical responsibility to be a positive presence with her no matter what led to one of my three TEDx talks, *Two Rules for Guys*—by far my most popular talk. The two rules for guys were, “Don’t be a dick, and don’t be a pussy.” When I did that talk, I was fascinated by the fact that it was the women in the audience who screamed in approval and delight when I introduced each rule. You can find links to all three of my TEDx talks on my drkeithwitt.com website.

Responsibility

As I mentioned in Chapter 1, we are responsible for everything we experience and do, but what is responsibility? Responsibility is first awareness/acknowledgement of our impact, and second willingness to be flexible and adaptive enough to solve problems.

Wise Self always assumes we are responsible for everything we experience and do and is committed to using our human superpowers to serve the highest good. Checking in with Wise Self daily helps us make the developmental leap from primitive defenses to Wise Self in charge.

The fourth stage of trauma work is staying connected to Wise Self, alert to harmony and disharmony. If disharmony involves trauma learning, Wise Self helps us work the first three stages until we feel ourselves back living a happy ending at the beginning of something wonderful.

Chapter 6: Living a Happy Ending in an imperfect world

These are chaotic times. Climate change, the rise of authoritarianism, resource depletion, mass migration in both hemispheres, social isolation, trauma learning, political extremism, and increasingly rapid change in every area puts huge stresses on individuals, families, and communities.

There is much suspicion about what is true and not true in the world, which leaves us uneasy and unstable as to whom to trust, and what the *real* story of anything is. How can we feel like we're living a happy ending at the beginning of something wonderful amid such chaos?

A foundation practice in dealing with the crazy world and living a happy ending is developing and strengthening Wise Self. The more Wise Self is your ultimate authority, the *less* likely you are to fall into defensive states, trauma learning, and social distortions. The more your Wise self is your ultimate authority, the *more* likely you are to feel yourself living a happy ending at the beginning of something wonderful.

Connection and contribution—everything is relationships

A chaotic world still involves us embedded in cultures comprised of people we care about with their own rhythms and needs. Post traumatic growth often involves relationships where we connect and contribute. Connecting and contributing in ways that feel healthy brings order and care to our immediate surroundings.

One of my favorite teachers is Bill O'Hanlon, who studied with Dr. Milton Erickson, the brilliant hypnotist/healer who lived and taught in the last century. O'Hanlon said in a talk on trauma that the three keys to turning post traumatic distress into post traumatic success are compassion, connection, and contribution.⁶⁵ We've explored compassion quite a lot so far in this book, but what about connection and contribution?

Connection

You've probably noticed how in most of the exercises I've suggested I encourage you to talk to someone your trust. Transparent intimacy with partner, family, friends, and networks heals us and gives us purpose.

Most psychotherapy is designed to help us give and receive love better because everything is relationships—connections. Relationships with ourselves, with others, and with the universe are the air we breathe and the water we drink. As you bring your Wise Self *intentionally* into giving and receiving love with others, magic happens.

After taking responsibility for her rage, Nancy found peace in offering forgiveness and devotional love to Frank. After taking responsibility for his betrayal of Nancy and his dissociative defenses, Frank felt renewed, offering Nancy 100% of himself consistently for the first time. Nancy and Frank's sex got more intense, as it often does when you trust, open up, and delight in delighting your lover.⁶⁶ Working the four stages to heal their trauma led them to this happy ending—trauma into transcendence.

Trauma separates, and that's why the first stage of healing is sharing the experiences with someone who understands until you both are comfortable being inside the traumatic feelings, reactions, relationships, and events. Similarly, living a happy ending is never completely alone, because we are an ultra-social species.⁶⁷ There are always intimate connections with others in happy endings. Healthy intimate connections with others flows from giving and receiving with people you trust.⁶⁸

If you aren't happy with any important relationship, ask your Wise Self to help you make it better. I'm serious! You don't have to have a disaster to cue transformation! You can invest your courage and love to offer more love to create more love.

If you're lonely and want a partner, your Wise Self will help (my book *Loving Completely* is all about this⁶⁹).

If you want a better connection with someone, your Wise Self will support you finding caring influence to help you and that person love better. If you're lonely, there are lots of wonderful people in the world for you. Your Wise Self supports you finding good people, creating relationships, and getting better at cocreating love worth having.

Contribution

We all need a sense of purpose—some effort we offer others. It can be art, work, volunteering, teaching, or anything else that feels like you're in service to someone other than yourself. Compassionate service of any sort helps us resolve traumas, reduce stress, and feel a sense of sacred meaning. Karyol Rusbult was a social researcher who developed Investment Theory to explain commitment in relationships.⁷⁰ She found that people valued their relationships more as they contributed more. She also found that giving more attention and care to a partner made the partner more interesting and attractive. Often an effective way to shift into a more positive state of consciousness is to help someone or something other than you.

The Wise Self is never 100% informed by culture

Another vital component of living a happy ending in an imperfect world is becoming increasingly aware of the strengths and weakness of the current age—including all the social contexts that you are embedded in, like family, jobs, community, political party, and spiritual orientation. Awareness regulates, and compassionate awareness heals, so awareness of how family, tribe, group, or community affects us gives us a chance to evaluate and regulate those effects through our most mature moral systems. For example:

- A great strength in the current world is the emphasis on human rights and freedom of thought and speech. Despite some current trends to the contrary, the world had been evolving over the last hundred years towards more tolerance of individual differences and more emphasis on individual rights to believe, relate, and do what feels right to each individual person.
- Another great strength of the current world is the wealth of knowledge and wisdom that most of us have at our fingertips. There are probably more easily available gifted teachers and solid data in every realm at this moment than in the rest of human history combined.

- A great weakness of this age, is how individuals and groups have learned how to manipulate opinions and behaviors of large groups of people, using modern tools of psychological/social influence broadcast through multimedia platforms. Understanding these forces and our *innate* vulnerability to them is protective. It is especially useful to understand one particularly dangerous human capacity—our susceptibility to mass formation psychosis.

Mass formation psychosis

Mattias Desmet is a Flemish psychologist and the author of *The Psychology of Authoritarianism*. He maintains that humans have the vulnerability under certain conditions to abandon their Wise Selves, their observing egos, and engage in group violence, bigotry, and shared delusions. Desmet traces the worst excesses of the 20th and 21st century—fascism, war, ethnic cleansing, degradation of democratic values—to this process, which he calls *mass formation*.⁷¹

The conditions that give rise to mass formation are:

- Social isolation.
- General anxiety and discontent.
- Feeling the world does not currently make sense.
- Ambient anger.

Out of these conditions, a worldview will arise—articulated by charismatic and committed leaders—that explains the current distress in terms of a malign and dangerous *other* group (like Jews, blacks, democrats, republicans, anti-vaxers, or immigrants). This dangerous group needs to be dominated or eliminated by *our* group. Our group is whomever shares our beliefs and maintains blind loyalty to our leaders. The leaders promise relief and certainty if everyone surrenders critical reasoning, remains loyal in the face of the leader's excesses, and is willing to blame and attack the *others*.

Participants of mass formation enter a form of mass hypnosis where they lose any sense of cognitive dissonance between discrepancies of the

mass formation beliefs with observable reality. They ignore injustices and atrocities that *our* group inflicts while being literally blind to any data—no matter how overwhelmingly persuasive—that disconfirms any aspect of the shared delusions. Desmet call this joining together in shared delusion and coordinated violence *mass formation psychosis*—“psychosis” literally meaning disconnection from objective reality, and mass formation meaning it arises from a mass of humans experiencing the four conditions.

Stalin’s Russia, Hitler’s Germany, Mussolini’s Italy, and Trump fanatics denying election results can all be understood as arising from large groups experiencing the four conditions, from which arose ideologies and leaders who validated their followers’ anger and offered targets for their outrage, explanations for their discontents, and, perhaps most importantly, a sense of shared sacred mission in community with fellow true believers. This is mass hypnosis of the worst sort.

Mass formation leaders hold power as long as they keep finding target groups to blame and suppress. Stalin targeted peasants, intellectuals, Jews, and was decimating his own communist party when he died.

We all have the capacity to experience mass formations! Our protection is Wise Self, critical reasoning, and dialogue with wise others with a backdrop of compassionate understanding for all.

Not me!

“Not me!” you might be thinking. “I’d never experience any mass formation. I’m too smart/aware/developed/informed/educated/etc. to participate in any mass hypnosis psychosis!”

Let’s see...

Mass formation exercise: *Is there any group you can’t stand? Conservatives? Democrats? Pharmaceutical CEOs? Telemarketers? Write about them in your journal. Describe how you view this group and*

what traits you attribute to its members. Selfish? Delusional? Hateful? Greedy? Stupid? Ignorant?

Who is a celebrity leader you despise? Who are in his or her group—followers you are contemptuous of? Write about the leader and followers in your journal. Include all your critical judgements of the leader and the group members—especially global judgements like, “They are all idiots!”

Do you want this leader and group suppressed? Do you want external rules or actions to protect you from them (like laws or police)? What are the rules that would make you feel safer? Write about these possible rules/actions in your journal.

Read the rules or actions you want to deal with this group. Write each rule or action in your journal and answer the three following questions about each one:

- *Is this rule/action designed more to constrain this group from doing damage so the group can become healthier?*
- *Is this rule/action designed more to punish or eliminate this group?*
- *Do I have any instincts/impulses to punish or eliminate this group?*

Do the table exercise from Chapter 4 (where you ask your guides, your Wise Self, and some embodiment of Spirit, “Do you love me?”). As you finish, connect with your Wise Self and read what you’ve written with Wise Self looking over your shoulder or even through your eyes. What insights do you and Wise Self have as you do this. Have any blindspots revealed themselves, or any insights about you and your capacities for being shaped by culture. Consider:

- *To the extent you are making global critical evaluations about the worth/quality/sanity/character of the members of this group, you are leaning towards mass formation. People are complex, and good people can have crazy beliefs, or support destructive ideas and actions.*
- *To the extent you want to punish or eliminate this leader/group rather than constrain them from doing harm, you are leaning*

towards mass formation. Punishment is not constraint, it is vengeance. Vengeance rarely heals, and usually provokes more violence.

- *To the extent that you see nothing valid or worthwhile in any positions taken by this group, you are leaning towards mass formation. Every ideology, no matter how distorted, has some valid elements. Discovering what might be valid about a mass formation might be a bridge to an individual caught up in the destructive delusions.*

We are all constantly influenced by our instincts, relationships, defenses, and desires. Conscious awareness *follows* unconscious decision making in almost every realm. For example, we instantaneously decide whether an action or person is moral or immoral, and then unconsciously look for confirming data. This is called confirmatory moral reasoning and is ubiquitous. Exploratory moral reasoning, where we suspend judgment, evaluate data, and cross validate with our own experience and with the input of wise others, is much rarer. Exploratory moral reasoning is a more complex and evolved form of moral judgment that requires extraordinary self-awareness and depth on numerous developmental lines including the moral line, the values line, and the self-line. Even though it is slower and more difficult than confirmatory moral reasoning, exploratory moral reasoning is protective of blindly following our unconscious biases.⁷²

Healthy mass formations?

Integral psychology looks for the healthy and unhealthy aspects of everything, and there are healthy mass formations. Healthy mass formations are the ones which *invite* compassionate understanding.

There are social movements that don't target people, but instead target cruelty. The Obama campaigns for hope, Greta Thunberg's mission to heal the biosphere, Gandhi's nonviolent revolution in India, the early Christians who maintained nonviolence through their deaths in the Roman arenas—all sought unity, forgiveness, and kindness. They arose from the same four conditions that produce mass formation psychosis—

social isolation, pervasive anxiety, and general anger in a world that doesn't make sense. Instead of fascist leaders and ideologies of hate, these movements generated compassionate leaders arising from ideologies of love and healing. Their missions are all variations of people rising up to end cruelty and seek unity. Like mass formation psychosis, the leaders seem luminous and larger than life, but these leaders use their luminosity in service of a sacred mission of love.

Wise Self helps us see unconscious biases and impulses that never completely disappear or stop arising

All the above reflects the reality that we are never completely free from external and internal influences, unconscious biases, and cultural standards. What Wise Self brings to the equation is an ongoing vigilance as to *when* we are influenced from more primitive unconscious biases and trauma learning, and *how* to turn from unhealthy biases and sensitization towards compassionate understanding.

Sometimes the subjective sense of living a happy ending feels moral and fits in effortlessly with our surrounding cultures of relationship, family, job, and culture. This happens more often than not, because people are warmed by others who are glad to be alive and grateful for what life has given them, even if they don't agree on all moral positions.

Sometimes our Wise Self gives us understandings and directions that are not considered moral by our cultural standards, and we need to shift from relating (being transparently collaborative) to handling (recognizing another's blind spot and adjusting accordingly). For example, to publicly endorse every woman's right to choose abortion would invite abuse in a rabidly anti-abortion religious community. To live a pro-choice happy ending as part of that community would require some complex social engineering and handling skills.

How does marriage fit into living a happy ending at the beginning of something wonderful?

The core of Nancy and Frank's transformation was their grateful love that they could finally sustain and trust. We are a pair bond species!

Quality of primary relationship routinely shows up as the most important happiness variable in social surveys.⁷³ A satisfying marriage or life partnership is the most powerful indicator of general happiness. I've also found marital contentment to accelerate each partner's abilities to navigate the four stages of resolving trauma.

My book, *Loving Completely*, is entirely dedicated to helping people have joyful relationships. I can't recapitulate that entire book right now, but I do want to emphasize the huge difference in relationships between *problem solving* and *creating drama*.

A satisfying relationship usually reflects two people who consistently solve problems and avoid negative drama with each other and others.

- Solving problems is two people being flexible and adaptable enough in a distressing situation to create mutual understanding and respect, resulting in an observable step forward in solving a problem. If only one person can do this, then that person compassionately handles the other with empathic understanding and firm but kind boundaries. The goals are always making specific progress and getting back to warmth as efficiently as possible.
- Avoiding drama means an ongoing *intentional* commitment to receive caring influence to regulate from helpless victim, punitive persecutor, or feckless rescuer (known as the drama triangle) into flexible and adaptive problem solving and limit setting, thus leading to healthier relating.

The Karpman drama triangle: *Back in the 1970s a psychiatrist named Steven Karpman who specialized in Transactional Analysis suggested that people generally were either relating/solving problems or mired in drama. He defined drama as a person or relationship engaged in repetitive non-productive cycling thorough three positions—victim, rescuer, and persecutor.⁷⁴ I'll explain the triangle using a couple named Jim and his alcoholic wife Mary*

- *A victim is someone feeling helplessly oppressed or victimized by people or circumstances. Victims have little subjective sense of*

personal power to deal effectively with problems. They have unconscious resistances to taking responsibility to grow, change, and become more powerful dealing with difficulties. As the victim suffers, people are moved or coerced to help. When someone tries to solve the problem or help the victim act appropriately, the victim receives the care/money/action/rescue, but stays in the helpless, “I have no power over my situation,” worldview. An example would be Mary being desperate to heal her damaged liver (the Doctor says she could die) but refusing to stop drinking (“Because I can’t.”). Most practicing addicts live in the victim position—“Support me so I don’t have to change.”

- *A rescuer is someone who tries to save a victim by helping them while refusing to set effective limits on the real problem. For instance, Jim dumping Mary’s vodka down the sink while otherwise tolerating and enabling her alcoholism, or Jim making excuses for her like, “Mary can’t come to work because she’s sick,” are classic examples of rescuing. Jim tries to help. Mary receives enough help to get relief but refuses to grow or address her core problem.*
- *A persecutor is someone who tries to help a victim by abusing them (often the persecutor is enraged because they feel victimized themselves by the other’s bad behavior). The persecutor’s rationale is often that they are trying to force change through tough love, but in reality they are usually abusing the victim to either get relief from their own frustration or to gratify sadistic impulses to attack someone who frustrates them. If Jim yelled, criticized, or humiliated Mary to get her to stop drinking, he would become the persecutor in the triangle.*

People shift position frequently on the triangle. Mary might lash out at Jim, blaming, screaming, or striking, shifting to the persecutor position. This might leave Jim feeling helpless and out of control as he shifts to the victim position, and so on. Real change never happens, and the repetitive rigid patterns continue, giving the illusion of connection and progress, but never delivering.

Almost all human interactions are either people being flexible and adaptive in helping each other enjoy life and solve problems, or people being rigid and clueless caught up drama triangles, continually enacting the same sick victim/persecutor/rescuer roles with no growth or progress.

Trauma work heavily involves the drama triangle, since people often feel like powerless victims of their trauma learning, and people who live on the triangle (pretty much everyone who has extra crazy programming) are much more vulnerable to being traumatized and feeling overwhelmed by adverse experiences. This is why the four stages all emphasize peoples' superpowers of expression, understanding, action, social engagement, and transcendence.

Healthy couples rarely stay on the drama triangle. Their Wise Selves can sense shifts to victim, persecutor, or rescuer and quickly adjust to taking responsibility, solving problems, and growing through the process. I call relationships between two people who are satisfied with their friendship, love affair, and capacities to heal injuries a *post-issue relationship*. These couples still have issues arise or intrude, but they quickly resolve them back to love and hardly ever get caught on the drama triangle. As we heal trauma and move towards living a happy ending at the beginning of something wonderful, we are generally moving towards being able to create and sustain post-issue relationships with our closest intimates.

Post-issue relationships are the goal of all psychotherapies

In a post-issue relationship, both partners relate to any problem as an opportunity to grow and love. A post-issue relationship still has problems, resentments, doubts, and selfish or thoughtless injuries, but there is always collaborative adjustment to love in response to pain or distortion.

Relationships are energetic containers that we share with intimates. If we nurture resentments or make negative comparisons, the container degrades and eventually self-destructs. If we nurture respect and love

and cultivate gratitude for what we have, we tend to give more and create more love.⁷⁵ In post-issue relationships, partners consistently enjoy each other and solve problems that arise. There's a luminous quality to a relationship container where you are never caught in distress with your partner or yourself for longer than seconds or minutes.

To engage in post-issue relationships with others, we need to have a post-issue relationship with the many aspects of ourselves. This involves attuned awareness of our states and ongoing connection with Wise Self so we don't get lost in defensive states or rigid positions. Post-issue *intersubjectivity* with others is a relational sweet spot, mirrored by post-issue *intrasubjectivity* with our different selves and states.

Whether a therapist is working with an individual, couple, family, or group, the organizing principle of the work, whether consciously or unconsciously, is guiding them towards cocreating stable post-issue relationships with others and themselves.

How do we develop post-issue relational skills? One answer is to use the information and techniques from my book *Loving Completely*. A simpler approach is to always be monitoring whether Wise Self is calling the shots.

Is Wise Self calling the shots?

The most crucial dimension of a post-issue relationship intrapersonally (within all the selves, memories, states, and programming that is *you*) is whether Wise Self is calling the shots for understanding and action. Is Wise Self in charge of the inner community? Is Wise Self helping all states? Do we notice when Wise Self is superseded or suspended? Do we regulate back to Wise Self being in charge? As we embody these skills, we tend to have progressively more post-issue relationship moments.

When we get lost in a painful affect or a distorted story we are not anchored in Wise Self, but instead are entangled in an issue, pushing us towards drama. When we think dishonestly or behave badly in victory/defeat, success/failure, getting it right/making mistakes, we disconnect

from Wise Self and risk toxic entanglement. This happens to us all! The key is *what do we do when we're triggered?*

First, normalize destructive states

We enter non-optimal states all the time! Instinctive shifts to defensive, selfish, lazy, immature, clueless, uncaring, arrogant, aggressive, frightened, self-loathing, shut down, or other non-optimal states happen! When they occur, we deal with them for better or worse.

- Better dealing with painful destructive states is post-issue consciousness—attunement sourced in Wise Self into problem solving with others and more shared warmth.
- Worse is indulging destructive impulses, elaborating on distorted stories, and increasing disconnections of all kinds—leading us into drama triangles which invite others to hop on with us.

Post-issue consciousness gets easier and easier with practice. Difficult states still show up but are less painful because they're regulated efficiently with love and wisdom.

The idea that personal work or spiritual practice can *eliminate* distressed states and painful emotions is a false promise. We *can* integrate distressed states and painful emotions into a life worth living. How? Keep doing the fourth stage. Let Wise Self help us and others as much as possible.

Conflict in post-issue relationships

Conflicts happen all the time in intimate relationships. A common source of trauma learning for people of all ages are repetitive unresolved conflicts with partners or family members. The ideal goal in any conflict is to get back to love in seconds. This requires both partners to immediately recognize conflicts as they arise and shift instantly into mutual understanding, some progress, and shared warmth. Such efficient processing needs huge capacities for self-awareness, flexibility, adaptability, and self-correction—all necessary in post-issue relationships. In post issue relationships both partners are experts at

quickly getting back to love in most conflicts. They never lose faith in their ability or their partner's abilities to resolve distress and separation into warmth and intimacy.

Anger and fear are tricky

All the emotions are important—both the pleasurable ones and the painful ones. All are designed to help us act. Emotions arise as background music of states designed to guide us through life. States come from our Shadow-selves, our adaptive unconscious, in response to what we experience—and each is our Shadow-self's best idea about how to think/feel/act/relate at this moment. Each state involves emotions, stories, action tendencies, and a moral valence (I/you are being good/bad).

Our unconscious generally acts to provide emotional support that is proportionate to the stories we generate and elaborate about the world. For example:

- Someone frowns at you and you feel mild anxiety and irritation.
- Someone screams in your face and you feel intense fear and anger.
- A stranger smiles and nods and you feel warmth and friendliness.
- Your lover looks into your eyes and says, "I love you so much!" and you feel an overwhelming upwelling of tenderness and sexual desire.

The kind and intensity these of emotions support a *real*, *proportionate* story of what's happening—a story that a group of informed observers would generally agree is the best explanation for what's happening.

Disproportionate defensive emotions

Anger, fear, disgust, and shame are tricky. They can arise disproportionately in response to *perceived* threats, attacks,

mistakes, or moral condemnations. In response to these amplified emotions, our unconscious reforms the stories into darker and more egregious to match the inflated emotion, and now we're into distorted perspectives.

Often disproportionate distress comes from traumatic sensitization—mild triggers causing amplified reactions. When distressed emotions arise with exaggerated stories of threat or wrongdoing, our Shadow selves can take the initial story, distort it even more towards the negative, and *generate even more disproportionate levels of emotion to support the distorted stories*. This is a positive feedback system like a hot water heater with no thermostat—it keeps heating up till it explodes.

For example, let's pretend that you and I live together, and I walk into the kitchen to discover that you left the milk out last night before bed. I am irritated at the mistake because I've told you several times to put the milk away so it won't sour and, more importantly, because it makes me mad when I see it out. You have trouble remembering to put the milk away and forgot again this time. My anger causes me to distort the story into "You know I hate you leaving the milk out, and you deliberately did it because you don't care about what I want!" This story makes me even more mad, because it's *so wrong* for you to *deliberately* disregard my feelings! Now my anger is proportionate to my distorted story of you not caring, but *completely disproportionate* to the real story of you making a minor mistake.

In post issue relationships, all the above starts, but is immediately recognized and regulated by both partners. I see the milk, feel a flash of anger that you didn't remember to put it away, notice that I'm creating a negative story, and remind myself that you forgot and that the habit of putting the milk away seems to be a difficult one for you to learn. I say kindly, "You left the milk out again." You are alarmed at my irritation and begin to defend, "I was in a hurry because I was late and..." Then you catch yourself, "I'm sorry! I'm trying to do it and I'm obviously not there yet." I respond with warmth, "No problem. I'll keep reminding you as gently as I can." We both smile and the conflict has been resolved.

This apparently benign exchange is an example of conflict in a post-issue relationship.

Love heals

Underlying all four stages of addressing trauma is the principle that “Love heals.” Working through the four stages can be understood as gradually increasing conscious and unconscious capacities to give and receive love with others and to love and integrate all the different aspects of ourselves. The experience of living a happy ending at the beginning of something wonderful is always characterized by loving feelings towards others and ourselves.

Rhesus monkeys spend up to 70% of their waking hours grooming each other, thus reducing stress levels and maintaining relationships. Cortisol is a stress hormone that increases with stress and decreases with relaxation, safety, and loving contact. With rhesus monkeys, cortisol is reduced more in the *grooming monkey* than in the monkey being groomed.⁷⁶ Giving love while refusing to participate in drama triangles creates more love, and accelerates growth of all kinds—physical, emotional, relational, psychosocial, and spiritual.

In honor of “Love heals,” the last exercise I’m suggesting in this book is an ancient Buddhist practice called “Loving Kindness Meditation (LKM).”

Just as we discussed in the contribution and connection section earlier, helping others relaxes and heals us. Modern research has demonstrated that Loving Kindness Meditation increases heart rate variability and mindfulness as it activates antiviral genes and deactivates inflammation genes.⁷⁷ Let’s try it now.

Loving Kindness Meditation (LKM)

- *Sit quietly breathing slowly and softly through your nose.*

- *Imagine someone somewhere in distress. It can be an individual like a friend recovering from surgery, or a group like the populace of Ukraine.*
- *Connect with the heart of this other. Let yourself attune to their suffering.*
- *As you do this, bless them (either out loud or in your mind), with the words, “May you be safe. May you be happy. May you be healthy. May you have an easeful life.”*
- *As long as it feels right, keep breathing your love to their heart while saying or thinking, “May you be safe. May you be happy. May you be healthy. May you have an easeful life.”*
- *When you feel finished write about your experience in your journal and share what you’ve written with someone you trust. When you share, do LKM with that other person.*

One way of inhabiting the fourth stage of trauma work, cultivating compassionate understanding and letting Wise Self call the shots, is to practice Loving Kindness Meditation frequently with as many different people and groups as possible. This is one of the best ways to live a happy ending in a chaotic world.

Epilogue: *You* living a happy ending at the beginning of something wonderful

All of us are burdened by traumas at different points in our lives. As we transcend the burdens of feeling weakened and stained into feeling stronger and wiser, we have flashes of living a happy ending at the beginning of something wonderful—sometimes for hours, sometimes for days, sometimes for years. *Every* experience of living a happy ending is legitimate and important.

Many of my clients have told me, “It doesn’t last, so it isn’t real.” I’ve always replied, “You’re feeling yourself living a happy ending right

now, and that is real! You feel at the beginning of something wonderful right now, and that is real! States change all the time, and no one I've ever known has been in pure transcendent bliss permanently. What we can do is use transcendent states as guides to more minutes, hours, days, and years of feeling like we're living a happy ending at the beginning of something wonderful."

If we create specific healthy states long enough, our Shadow-selves will turn those states into traits—habits of compassionate understanding and right action. These good habits lead to growth and better judgments, but life is never so easy that we can afford to stop monitoring with Wise Self. Happy endings at the beginning of something wonderful require a lifelong commitment to using our superpowers of focused intent and action, in service of principle, and driven by resolve to be grateful for life, to take responsibility for everything we experience and do, and to keep turning trauma into transcendence.

This is why the fourth stage of cultivating compassionate understanding and letting Wise Self call the shots is so important. Wise Self doesn't curse fate when bad things happen. Wise Self guides us to working the four stages until we feel stronger and wiser. Wise Self knows *a happy ending is always there if we keep loving, growing, and giving.*

How about *you*? Have you had moments/hours/years of feeling like you're living a happy ending at the beginning of something wonderful? Have you had the experience of transforming trauma into transcendence, maybe by utilizing the contents of these chapters? Do you feel more able to experience the living-a happy-ending state after reading this book? I hope so!

I came of age in the sixties and seventies when the human potential movement was blossoming, and humanistic psychology was all the rage in progressive psychotherapy circles. As the years passed, much of the idealism of that time was compromised by individual and collective trauma. The claims and promises of many of the systems couldn't hold up to empirical research, the realities of human resistance to change, and

the increasing stresses of modern and post-modern life. Trauma is real and ubiquitous. Sustainable personal transformation is difficult and slippery. Blindspots and defensive states keep arising no matter how much therapy and psychoeducation we flood our lives with.

On the other hand, social research, neurobiological research, and evidence-based therapy systems have demonstrated that people can become healthier and happier in every arena. It's easier for some of us in certain areas, and harder for some of us in certain areas, but we all have the human superpowers to grow if we can receive caring influences and embody those influences every day.

I care about you! I want you to grow, love, and exist as much as possible in the living-a-happy-ending-at-the-beginning-of-something-wonderful state. You can do it! You have human superpowers, and loving influence is always available if you seek it out. Please do! Transforming trauma into transcendence is beautiful and good and is our birthright as self-aware ultrasocial beings. All we need do is decide to grow, love, and face everything the universe presents us with.

Appendix 1: Integral understanding expands everything

What's your best understanding of yourself at this moment? Most people find this a confusing question because there are so many ways to understand ourselves and everyone else. But what if there were a set of perspectives that gave you the fullest sense of yourself right now? This is what I found when I began studying Integral theory.

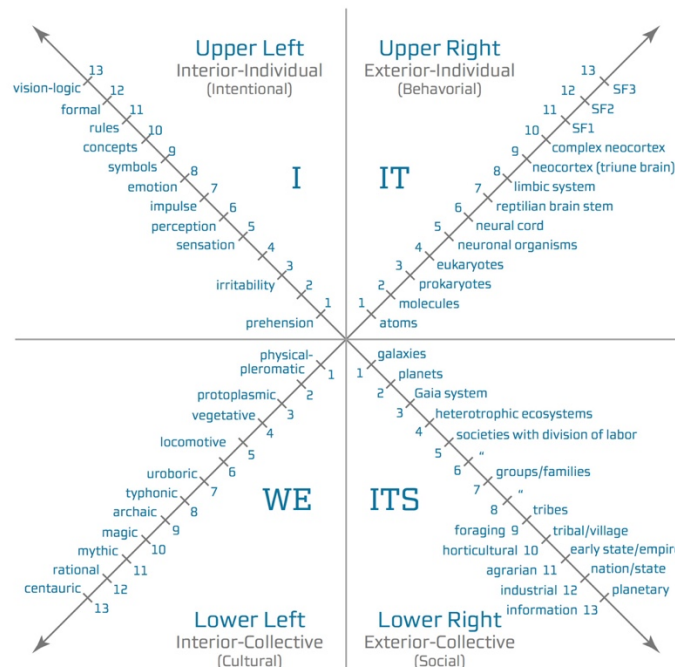
Integral theory was developed by Ken Wilber as an interconnected set of perspectives to most fully understand ourselves and the universe. His

goal was to determine a minimum number of dimensions to deliver a maximum understanding of *everything*. In this sense, Integral is not a theory at all, but a *metatheory*, a scaffolding through which all theories, approaches, data sets, or experiences can be expanded.

In this appendix, we'll first go through the basic architecture of Integral —quadrants, levels, lines, states, types, and progressive worldviews. After I explain them, we'll revisit my arrest at eighteen (which I detailed in Chapter 3) for an example of how Integral can dramatically expand understanding of traumatic experiences.

Quadrants

The four quadrants of Integral are represented in the accompanying chart, borrowed from Ken Wilber's *Integral Spirituality* (with his permission, thanks Ken!). The center is the Big Bang, and the lines reflect evolution in all four quadrants since that momentous moment.



The right quadrants are observing individuals and groups as *objects*

- The upper right quadrant (UR) is the individual viewed as an object from outside in. Any objective measure of an individual—cell metabolism, blood work, brainwaves, autonomic arousal, skin tone, facial expression, eye color, test scores, observable words and gestures, etc.—is included in the upper right quadrant.
- The lower right quadrant (LR) observes groups as interobjective systems relating in *externally visible* ways. Traditions, laws, dances, objectively described ceremonies, spoken words, exchanged messages—all the *externally observed connections* characterizing groups and cultures—comprise the lower right quadrant.

"Externally visible," in the UR and LR quadrants means that we can always cross-validate the UR and LR by having other people make the same observations we make. This is the great beauty of science, based as it is on *replicable* observations. If I see three sheep, you'll see three sheep. If I hear you say, "Hi Keith," while you smile and hear me say, "Nice to see you!" a thousand others who observe us will hear the same words and see the same expressions.

The left quadrants understand individuals and groups from the *inside*, from their *interior* phenomenological experiences

- The upper left quadrant (UL) is comprised of all your personal, individual interiors, experienced uniquely by you and unqualifiable by science—for instance, no one can truly understand *your experience* of affection or anxiety in graphs, bodily measurements, brainwaves or anything external. The external measures *reflect* your experience, and *imply* affection or anxiety is happening, but can never *fully represent or capture* your subjective experience. Your inner experience is unqualifiable to science and unique to you. The UL is phenomenology, self-reflection, and massive unconscious influences (I define

everything in your non-conscious self, both constructive and destructive, as your Shadow-self, your adaptive unconscious⁷⁸).

- The lower left quadrant (LL) is *we*, what you and I *intersubjectively* experience as we connect with each other. *We* can feel shared warmth, anger, love, fear, anxiety, depression, joyful celebration, crippling grief, excited insight, or transcendent unity. Every social connection experienced from the *inside* of me interconnected with the *inside* of you is a *we* experience, unqualifiable to others outside of *us*. The LL includes our morality—our felt sense of rightness and wrongness within our relationships and cultures.

The four quadrants are not reducible to each other because they are qualitatively different dimensions that cross-validate and illuminate one another. They closely reflect the core aspects of the universe that Plato, Kant, and many others have independently discovered over the centuries—the beautiful (UL), good (LL), and true (UR and LR). *Not perceiving* any of these quadrants limits our understanding. Experiencing the moment through all four core dimensions opens us to radically expanded understanding.

Developmental lines and levels

Well into the twenty-first century, most of us are familiar with the term, "Multiple intelligences." We know that some people are more or less advanced intellectually, artistically, mathematically, socially, morally, and relationally. Even more, we instinctively know that we can develop—can grow—in these multiple intelligences throughout our lives.

Social scientist Carol Dweck has further demonstrated that any intelligence can be increased with effort and progress--what she calls a "Growth mindset." There are two main forms of mindset, growth mindsets and fixed mindsets:⁷⁹

- If we have a growth mindset, our focus is on gradually improving understanding and skill in an area of our choice. In other words, we

can *become smarter or more accomplished at anything* if we receive caring influence and commit to *effort and progress* over time.

- If we have a fixed mindset, we define ourselves by outcomes and tend to believe intelligence is innate and not learnable.

For instance, “I’m no good at math,” implies a rigid “Have it or don’t have it,” fixed mindset. “If I keep studying, I will find math more interesting and useful,” implies a fluid growth mindset where effort and progress is the bottom line.

Another word for a form of intelligence is a *line of development*. For instance, our cognitive line of development marks how we develop thinking and reasoning skills from conception onward. Infants have very little conscious self-awareness. They grow to:

- Be able to see themselves as separate from mother at around one-year-old.
- Then observe their own thoughts and emotions at around two-years-old.
- Then to experience the world in black and white, right and wrong, concrete dimensions at around six-years-old.
- Then to understand relativistic thinking and shades of gray in adolescence.

You can see from this how the capacity to think expands over time in levels that include and transcend previous levels. The cognitive line of development is just one of many lines including our morals line, interpersonal line, psychosexual line, values line (what we value the most), integration-of-defenses line (how well we regulate ourselves when our defenses are triggered), and others.

All lines of development have characteristics in common. Everyone starts at the lowest level and progresses upward in *stages, levels, or*

probability waves (you become more likely to function a higher levels).
The levels progress in one direction unless someone is injured or traumatized (which can cause regression), and *we can't skip levels.*
Nobody is born being able to understand Kant's *Critique of Pure Reason.*
We learn basic self-awareness, *then* language, *then* simple concrete understanding of the world, and *then* more complex thinking skills.
Then, if we're interested, we can read and understand *Critique of Pure Reason.*

At any given moment we are functioning at different levels (or *altitudes*) on *all* of our developmental lines. We can have peak experiences of high functioning (like when your three-year-old says, "All we need to do is just love each other!"), or regressed experiences of lower functioning (like when you scream at your dog for peeing on the carpet), but in general, at any given time, we have a *center of gravity* on any line where we tend to hover until we progress to the next level of development.

A brain surgeon (having progressed through multiple stages to be able to perform complex procedures) is high on the surgical line of development as he removes a blood clot from a stroke victim's brainstem, but quite low on his moral line of development as he indulges his gambling addiction, bets on the Superbowl on the way home, and then lies to his wife about it later. The next day he might be higher on his morals line as he confesses his gambling addiction to his wife in a therapy session and resolves to go to Gamblers Anonymous and start a recovery process. He then has to do the work to grow morally to the level where it is no longer acceptable *to him* to gamble and lie—which would indicate vertical growth on his morals line.

Lines of development all have current levels of functioning. When we're relaxed and socially engaged, we tend to operate from our best current levels, and occasionally ascend into peak experiences of higher functioning. When we're threatened, defensive, or traumatized, we tend to regress to more primitive and immature levels of functioning.

States

What are you sensing right now in your body? Hot, cold, hungry, thirsty, tense, relaxed? Sensations are the foundations of emotions. What emotions are you feeling at this moment? Interested, bored, happy, sad, anxious, or a combination of different emotions? We can be consciously aware of one discrete emotion or blends of emotions, depending on our altitude on our emotional-awareness line of development. The emotional awareness line of development progresses from observing simple sensation as infants (you yell at me and I cry), to feeling discrete emotions as toddlers ("I'm mad!"), to feeling blends of emotions as young children ("I'm mad and tired and you're scary!"), to feeling blends of blends of emotions as adolescents and adults ("I'm tired and mad at you, but I also love you and understand you didn't mean to hurt me.").

What's your explanation for how you're feeling right now? "I feel happy because it is a sunny Saturday morning," "I feel anxious because my friend Mason hasn't gotten back to me and maybe he's mad at me." "I feel satisfied because I just finished doing my taxes, but I'm also drained from doing taxes."

At given moment we are experiencing sensations and emotions along with stories explaining our experience. These are *states of consciousness*, and they happen *constantly*.

From conception onwards, we are always in one state of consciousness or another. We can't become conscious of the stories we instinctively create with states till around two when we are old enough for that level of self-observation (for instance, "I'm being a good boy," or "I'm being a bad boy,"). From then on throughout our lives, whether consciously or nonconsciously, our states always have meaning to us in one form or another.

We can shift states of consciousness in less than a second. I can be happily walking up Tunnel Road trail by my house, stoked by nature in the mountains, and then trip on a rock and almost tumble into the canyon. Instantly my heart rate jumps up 20 beats per minute, my cortisol and adrenaline surge. As I step back onto the trail, I feel relief

and resolve to be more careful. I have instantly shifted states of consciousness several times in three seconds.

When you meditate or do yoga you are practicing a contemplative state of consciousness which involves a relaxed physical experience, peaceful emotions, and often a story about everything being connected in some unified manner.

You and I have an argument, and we enter reciprocating angry states of consciousness with tense bodies, hostile feelings, and nasty stories about each other. You'll notice this is a Lower Left Quadrant intersubjective sharing of states—a yucky *we* space observed from our Lower Left Quadrants. Shared emotions can be particularly powerful because we are programmed through mirror neurons and social instincts to resonate with others' attitudes and actions, for better or worse.

In general, our states often fall into two categories--healthy responses to the present moment and defensive states:

- Healthy responses to the present moment are states where we feel secure and positively socially engaged—quite a lot of the time for most of us.
- Defensive states spontaneously arise when our nervous systems read "Threat!" and we have amplified or numbed emotions, distorted perspectives, destructive impulses, and diminished capacities for empathy and self-reflection.

Traumas evoke and reinforce defensive states. To heal traumas, we often need to progress on our integration-of-defenses line of development, which tends to make us wiser and more compassionate in general. Progress on the integration-of-defenses line involves increasing capacities *while in defensive states* (aroused, shut down, or wanting to attack or flee) for compassionate self-observation, self-regulation of distressing emotions, and self-correcting towards empathy, self-reflection, and compassionate understanding.

Progression on the integration-of-defenses line of development is necessary for learning how to identify trauma states and resolve them into transcendent states of compassionate understanding.

Types

Are you a parent? Do you have more than one child? If the answer to either of those questions is, "Yes," then you know that all of us are unique types of people. Even if you have identical twins, you quickly notice how each child has a unique personality, even though the two kids share the exact same genes.

I've studied a bazillion personality typologies and love them all. Introvert/extrovert, Myers Briggs personality types, the nine Enneagram types, masculine and feminine, highly emotional or mostly mellow...the list is endless.

Most types are at least partially inherent in our biology⁸⁰—like shy or extroverted, novelty seeking or harm avoidant, or addictive or non-addictive—but *there are healthy and unhealthy versions of every type*. Our developmental tasks are to become the healthy versions of whatever types we happen to be. If we try to refuse to accept some central type of ourselves—say try to deny being more introverted or more extraverted—we tend to suffer and get sick. We can learn to be more extraverted or introverted, but not at the cost of pathologizing our fundamental nature! Most temperamental traits are 40% to 60% heritable.⁸¹ If we accept our types and work to be progressively healthier versions of whatever types we are (you can see how lines and levels are relevant here) we tend to get happier, healthier, and more self-aware.

I emphasize growing our own type because most cultures favor certain types. For instance, in the last century in America, introverts were somewhat pathologized, and well-meaning teachers and school counselors pushed parents to pressure their introvert kids to be more extroverted. This caused a lot of introverts (who are 50% of the

population) to feel somehow disadvantaged and one down to their more extroverted peers.⁸²

I came home once to find my wife Becky in tears. Concerned, I asked, "What's wrong?" She said, "I'm an enneatype six! Enneatype six is the worm of the enneagram!"

At the time, I thought I was an enneatype three (the performer or achiever), and it was hard to take her distress seriously, but she clearly had a major bias against enneatype six—often called, “The devil's advocate” or “The loyalist.”

Ironically, as we studied and self-reflected further, it turned out that Becky was actually an enneatype nine (the peacemaker), and *I* was an enneatype six. Periodically I tease her about marrying, "The worm of the enneagram," but not too much. Nines are sensitive.

Worldviews

Children develop through different understandings of the universe. We can track them generally through:

- **Egocentric:** Small children are largely focused on themselves and have sporadic empathy for others. They tend to believe in magic (Santa Claus, tooth fairy, etc), and assume parents can do magical things.
- **Conformist:** You probably stand in line at the bank, even when you're in a hurry. Grade schoolers tend to believe in their family and cultural roles (good boy or girl, jokester, star athlete, good student, poor student, etc) and black and white rules without question. For instance, they tend to conform to the rules of the family, school, club, or congregation without much questioning of the meaning or rationality of those rules.
- **Rational:** Teenagers have more mature brains that can think more relativistically and be able to engage in critical analysis. They can

hold competing concepts simultaneously, while examining them for logical consistency. They often question the meaning or rationality of rules and are drawn to merit-based hierarchies like grades or athletic contests which reflect how individuals compare in objective fashion.

- **Pluralistic:** As teens grow, they often care about rights and care for all people, even animals, and not just their family, friends, and school. What feels fair now is additionally influenced by what is caring and right from more worldcentric, egalitarian understanding.
- **Integral:** If a person keeps developing, he or she can grow to have a felt appreciation for all points of view and can see the healthy and unhealthy aspects of all previous worldviews. At an Integral center of gravity, a person can observe their past selves, current selves, and future selves through the lens of egocentric, conformist, rational, pluralistic, and Integral. At an Integral level of functioning, an individual naturally experiences themselves and others as different types, cycling through different states, and observable simultaneously from the inside and outside as an individual and a member of various groups.

Most of us have capacities for all these worldviews, but in certain conditions one dominates. Conformist/traditionalist might dominate at church. Rationalist competitor might dominate at work. Pluralist care-for-all might dominate advocating for equal access to healthcare. Here are some healthy and unhealthy examples of the major worldviews present today:

- **Egocentric:** You might be egocentric running into the waves on a hot day, with no care other than the gratification of sun and surf. You might be egocentric when you don't get enough sleep, your

kid wakes you in the middle of the night, and you harshly tell him to "Shut up!"

- **Conformist:** You might sit in a pew at church and believe that those who follow Christ as the one messenger of God are the chosen ones, and that others are going to Hell and not as worthy of care or rights. You might discover your candidate cheated on his wife, accepted bribes from the gun lobby, and lied repeatedly about supporting health care for children, but you vote for him anyway because you never vote against your party.
- **Rational:** You might start a business, and what matters is following the business plan, solving problems pragmatically and rationally doing your absolute best to help your company succeed. You also might be willing to exploit a legal loophole to put a competitor at a disadvantage.
- **Pluralistic:** You might be moved to start a non-profit that helps disadvantaged children have some of the same opportunities as more privileged kids. You might be frustrated because you want your NGO to run well but you hate being a boss.
- **Integral:** You might tend to your investments to maximize gain, but also choose ecologically responsible funds. You might see the pleasures and hazards of self-centeredness (enjoying life but attuning to others), conformity (appreciating sacred teachings without marginalizing other groups), rationality (seeking success and profit while not sacrificing self-care and rights for others), and pluralism (everyone deserves care and rights, and no one should be considered better than others, but we need hierarchies, organizational rules, and profit to keep society healthy).

As you observe yourself and others throughout the next week, keep these worldviews in mind. You'll have moments of different ones dominating your consciousness.

You'll also observe that, except for the Integral worldview, all these worldviews tend to fight with one another.

- Fundamentalists often take issue with scientists who provide data differing from doctrinal truths.
- Egocentrics tend to be contemptuous of those who disagree and say, "No," to their selfish demands.
- Scientists can be dismissive of people of faith, or those who trust intuition, personal experiences, or spiritual principles over what scientists believe to be facts.
- Pluralists can be disgusted with rational capitalists, thinking them greedy exploiters of the environment. Pluralists can think religious fundamentalists and conformists are clueless idiots, and dismiss egocentrics as narcissistic douche bags—all the while maintaining themselves to be egalitarian and non-judgmental.

Exercise: Feel the worldviews

As you observe your own and others egocentric, conformist, rational, pluralistic, and Integral worldviews, take a little time each day to write about them in your journal. Notice how you can shift from egocentric (you're hungry and want food now!), to conformist (everyone else is wearing shorts and I'm wearing a skirt!), to rational (how can that guy on TV say he doubts man-made global warming when the scientific evidence is so overwhelming?), to pluralistic (it's not fair that some schools get less money than others!), to Integral (I can see the healthy and unhealthy sides of what we're discussing). Most of us have a worldview we spend most of our time looking through—called our center of gravity because it pulls us into that worldview's perspectives—but we shift from one to another frequently in response to different environmental cues.

After a week of entries, read what you've written and see where, when, and how long you operate out of which worldviews. Write about your insights.

Share what you've written with someone you trust.

Integral embraces all worldviews

Integral understanding looks for the healthy and unhealthy manifestations of all worldviews, types, states, and developmental lines. Integral understanding cross-validates continually across all four quadrants and is always open to better perspectives if they seem to be more beautiful, good, or true.

I've just sketched the barest outlines of Integral theory (also known as AQAL for all quadrants, levels, lines, states, and types). There is a *vast* body of work from Ken Wilber⁸³ and others (including me⁸⁴) that expands Integral in every direction from evolutionary psychology, to depth psychology, to anthropology, to architecture, to medicine, to contemplative practices and spirituality, and on and on...(remember, Integral is a metatheory that expands all other theories). If you want a broader view of the Integral universe, check out books, videos, audios, and articles by Ken Wilber, me, or, any of the of thousands Integral enthusiasts around the world.

Trauma into Transcendence uses the Integral metatheory to explore trauma as inevitable, necessary, and a path to growth. Throughout this entire book, whether I was using Integral terms or not, the material is being presented *from* and *through* Integrally informed perspectives.

How can the AQAL framework be useful? Let's use what I've described to more deeply understand the arrest trauma I described in Chapter 3.

An Integral view of Keith's college catastrophe

In Chapter 3 I described a traumatic event—an arrest—that happened to me at 18 and created some post-traumatic trauma learning I needed to

deal with. 1968 was a strange time. A lot of people look back with nostalgia on the summer of love in San Francisco and the drugs, sex, and rock-n-roll hippy counterculture, but to me it was a violent and dangerous era (though, I admit, I also had an incredible amount of fun!). We post-WWII baby boomers were given progressive educations along with a booming economy and material security. New schools were being constructed across the country in the mushrooming suburban communities, and eager and dedicated teachers offered their best understandings of the humanities and sciences. Teenagers were taught critical thinking and, unbeknownst to our conformist/rationalist parents and teachers, were developing world-centric pluralist ideas and principles at odds with many traditionalist values and rationalist corporate/nationalistic moral compromises like Viet Nam, corporate pollution, and the CIA supporting a right wing coup in Chile. As we boomers looked with pluralist/rational eyes at American rationalist/conformist culture, we became increasingly appalled and infuriated.

At eighteen I was not prepared for the draft, college, independent living, the cultural explosions of the hippy/human potential movements, or the crazy contradictions of being on the UCSB campus as a college student while my contemporaries, including my older brother, were being sent to what increasing was revealed as an unjust and unnecessary war in Viet Nam (cue déjà vu with Iraq!).

Besides the overwhelming influence of the counterculture with its exciting alternatives to what seemed to be a hypocritical mainstream America, to be on a University of California college campus was to have daily disillusionment with Ronald Reagan's California state government, Richard Nixon's federal government, and what the U.S. represented in the world at that time, where the Viet Nam war was unpopular with everyone.

The US military draft was particularly outrageous. In a form of modern-day slavery, eighteen-year-old American boys (disproportionately from poor families who couldn't afford college deferments) were forced into the military to go kill and be killed by Vietnamese strangers who were

fighting for their country. The war itself was waged by Lyndon Johnson on the pretext of two US destroyers being fired on in the Gulf of Tonkin while engaged in illegally propping up a corrupt South Vietnamese dictatorship. As it turned out, the second episode, was a false alarm from a U.S. commander, but the Johnson administration never acknowledged the mistake.

Think about it. What if the federal government went into your communities and high schools and coerced and shamed your sons into forced military service where thousands of American draftees were being killed and crippled every year? Fifty-five thousand Americans and millions of Southeast Asians died in America's war in Vietnam (while we watched every night on CBS, ABC, and NBC). How would you feel if your sons, their classmates, and your community's sons were all threatened with being drafted to potentially die or be physically/psychologically disabled in an unjust war? Just remembering it pisses me off, and, now that I have a grown son, I sympathize with a man I admired who emigrated to New Zealand with his three sons until the draft ended.

The draft wasn't the only American shame we emergent pluralistic teenagers had to face in the sixties. Freedom riders from all around the country, appalled by a hundred years of Jim Crow fundamentalist racism, were bussing to the south to help to register black voters. They were met with private and official violence, with many of them jailed and some killed.

Even more fundamentally, it was painfully obvious that men were calling the shots for women and had been forever. Birth control was unavailable to many US women (one of my first therapists was jailed for performing illegal abortions), and it was increasingly obvious that women had been treated as second class citizens for literally thousands of years.

And then there was the War on Drugs. American drug policy seemed insane in 1968 (it mostly still does!). To college students raised by

parents smoking and drinking their way through the nightly news while deadening anxiety and depression with miltowns and amphetamines, going to jail for smoking a joint was the height of hypocrisy.

In hippy college culture, pot was almost a sacrament. Psychedelics like LSD and psilocybin were viewed as sacred spirit food. College dope dealer was an honorable profession in 1968.

Leaving high school (where I was a top student and star athlete) to live away at college, I plunged into this clash of worldviews, struggling to find identity and purpose in a country I increasingly felt alienated from. The counterculture seemed more honest, caring, and authentic to me, its self-destructive aspects less visible in 1968, and its promise of community, transcendence, and post-puritan morality intoxicatingly seductive. I embraced the hippy culture with enthusiasm, and three months later was standing in a grubby apartment, staring down the barrel of gun, and potentially facing years in prison if I survived the moment.

WTF?!

From an Integral perspective, the sixties marked an evolutionary shift from a mostly conformist and rational culture to a significant percentage of the populace being pluralistic, multi-cultural, worldcentric, and egalitarian. This pluralistic leading edge of American culture, which included baby boomers, academics, civil rights advocates, and many democrats, was becoming worldcentric, egalitarian, and multicultural—a worldview in violent disagreement with conformist fundamentalism and rationalist cynicism. “My country right or wrong,” was rallying cry to nationalists/traditionalists, and contemptable to post-modern pluralists.

There was a lot to be outraged by. Many today don't remember how, in post WWII American, countless conservative Christian congregations enthusiastically supported racism, red-baiting, and throwing conscientious objectors in jail. Arrogant rational corporate consciousness was increasingly organized to extract as much profit as possible without much felt responsibility for human or environmental consequences (like

the energy companies, tobacco companies, and military industrial complex—all poster children for unhealthy rational culture).

The emergent, peace-centered progressive movement was sick of war, death, corruption, and the draft. This pluralistic wave crashed against conformity and rational capitalism, winning the anti-war give-peace-a-chance moral battle, and ushering in an upleveling of the national moral standard to become more worldcentric. In the midst of chaos, war, and protests, the culture shifted from rationalist/conformist towards pluralistic/rationalist and everything changed.

The sixties cultural transformation was a big deal!

To put this in perspective, there had been only three such major shifts before in human history:

- A shift from tribal culture to egocentric power-God agrarian empires around two thousand BC.
- A shift from power God empires to conformist, religious based kingdoms and empires around six hundred BC.
- A shift from religious conformist empires to reason-based philosophies and governments (mostly forms of democracy but also communism) in the eighteenth century.

This fourth shift towards pluralism had never happened before in the history of the world, and we college students were at the center of it in the late sixties.

Lines and levels

Even though college culture radicalized us young people to become more pluralistic, many of us were also intensely self-absorbed and egocentric. In vast numbers of us, being higher on lines associated with social responsibility and worldcentric identification was often accompanied by low altitude on other lines associated with self-absorption and narcissism. This combination of worldcentric responsibility and egocentric narcissism was what Ken Wilber called

"Boomeritis," which infected a significant percentage of my baby boomer generation, and led to many of the excesses of the sixties and seventies.⁸⁵

My family was great by the standards of the fifties and sixties. My parents were teachers who provided an enriched intellectual environment for my two brothers and me, and basically supported us deciding for ourselves on what to think and do. They were interested in the world and progressive in their politics (and continued to be throughout their lives). On the other hand, it was every man for himself in my family. America is an individualistic society (as contrasted with more communitarian cultures in the East), and my family was based on fierce individuality. In my thirties I asked my father for his philosophy of parenting, and he used the word, "Independent" three times in ninety seconds.

As I transitioned into adolescence, I felt increasingly ashamed and separate from my peers. This reflects the interface between culture and type:

- I was intellectually gifted, but also emotionally sensitive and vulnerable in a culture that mostly ignored interiors—like feelings, cravings, instincts, and hunger for insights and spiritual growth. This left me feeling separate in the upper left quadrant interior universe of feelings and spirituality, and the lower left quadrant interiors of mutuality through my early adolescence. Upper left quadrant individual subjectivity and lower left quadrant intersubjective mutuality play out differently with each individual, and each type of person experiences the interior qualities of I-ness and we-ness differently. I literally didn't find people wired like me until I entered therapy and discovered the worlds of introspection and depth psychology. These became a through line that oriented me in the years that followed.

- My sexuality type was heterosexual leaning towards bisexual in a homophobic society—thus evoking personal shame and requiring me to hide my bisexual aspects from everyone including my first therapist Joe who thought homosexuality was a disease.
- I was by nature less communitarian and more individualistic. My sports were individualistic—tennis, wrestling, karate, surfing—and I cared much more about my individual success than team success. This left me secretly feeling shame at seeming to be such a narcissistic, selfish person since it seemed I cared too much about my own success and gratification and not enough about team.
- I am an enneatype counter-phobic six. This is a fear type who compulsively must do the things he fears the most. I experienced the world as frightening but felt an obligation to take risks which presented themselves—hitch hiking, drugs, sexual adventures, and martial art challenges—often without considering the larger consequences.

The upper right and lower right quadrants

The upper right quadrant looks at the individual from the outside, as an object. From the UR (the *individual objective*), when I was arrested, I was a shoeless hippy with long hair carrying a guitar case with a pound of synthetic psychedelics in it. My roommate Larry and I were standing in a bare apartment with two short haired thirtyish guys in pseudo-hip outfits. I remember how one guy walked causally over towards me and I thought, "He has a gun."

Sure enough they pulled out pistols like gunslingers and screamed at us to freeze, and, wisely, I froze.

If I had been hooked up to monitors, they would have reflected multiple physiological reactions. My pulse skyrocketed, my blood pressure peaked, and my hands were in the air. Strangely, the words that automatically came from my mouth were, "I've got nothing to hide."

All these details could have been verified by external observers of the scene (though I would have had to report the, "He has a gun," thought).

The lower right quadrant looks at groups from the outside as objects. From the LR, the *interobjective* which includes externally visible communications and rules, I was in a culture where it was a felony to have a pound of synthetic psilocybin, try to sell it to anyone, or to consume it to get high. According to the laws of the time, I could have been (and many would have said, "Should have been!") sent to prison for five to ten years, and never been able to vote, sit for a licensing exam, or work in most industries.

The upper left and lower left quadrants

The upper left is the individual intrasubjective, and this is where most trauma programming takes place. Our unconscious Shadow selves determine in mysterious ways what is traumatic or not, and program us in self-protection.

We can sometimes predict who might be more vulnerable to feel traumatized using UR and LR externally observable individual and collective data. For instance, my chances of having a post traumatic reaction would be increased by:

- The more adverse childhood events like abuse or neglect I'd suffered.
- The more I experienced dissociation as an infant.
- The more reactive my hypothalamus/pituitary/adrenal (HPA) axis (and especially my amygdala in the limbic area of my brain) was to distressing images or stressful social cues.
- The more I measured anxious/ambivalent or disorganized/disoriented on infant or childhood attachment tests.⁸⁶

But the actual *experience* of being traumatized and rewired by a horrific event is unqualifiable to right quadrant science. It is an Upper Left subjective experience.

Staring down the barrel of that gun, I blanked out, and something inside me changed instantly. I had a post traumatic sensitization from that shocking moment, and still feel a little charged remembering it fifty years later. For a number of months following my arrest, whenever I got into an elevator, I would imagine men pulling out guns, and feel rushes of fear.

My traumatization actually served its evolutionary purpose in the months that followed. I was much more thoughtful and cautious than my peers during the Isla Vista riots in 1969 and 1970—probably a good thing in retrospect, since many students were unaware of the huge risks they were taking protesting and provoking frightened, tired police officers and national guardsmen who were brought in from out of town to deal with the craziness. The famous night the Bank of America burned down, I told my friends I wasn't going out, that it was too dangerous. I remember the glow in the sky a half mile away after the blaze got started by half politically outraged and half thrill-seeking student rioters—some of them my friends.

In addition to making me more cautious, the trauma and the social aftermath radicalized me and left me deeply embedded in the counterculture. Even though I was largely an innocent in the arrest—I was literally going along because Larry had said he was scared and I foolishly offered to accompany him—and my case was eventually dismissed, I was appalled and ashamed at the inequity of the criminal justice system.

My Aunt Dorothy was the Dean of the USC law school at the time (she's now a federal judge) and was in Santa Barbara that weekend on a conference. She bailed me out the next day after a night in jail I'll never forget. Getting arrested and thrown into a "tank" of prisoners as an innocent eighteen-year-old is another form of trauma. My roommate,

Larry, who was kept separate from me so we couldn't coordinate our stories, had to fight off an inmate who tried to rape him. Aunt Dorothy hired James Slater, one of the best criminal lawyers in Santa Barbara, who eventually became a Superior Court Judge. He got my case transferred to Los Angeles where Aunt Dorothy and Uncle Jim had all kinds of connections. The judge who eventually heard my case told me *from the bench*, "I know your Uncle, and what you did was self-destructive. Don't do it again!" as she dismissed my case.

From an UL perspective I felt incredible relief at dodging a hail of deadly bullets—felony conviction, expulsion from UCSB, prison, and the thousands of dollars it would have taken to continue the case. I also felt deep distress over the inequities of the system—it felt primitive and punitive to me, and I was painfully aware of how I got a special deal because I was a privileged white college student.

From a LL perspective I was appalled at the unfairness and ashamed at how great it felt to get special treatment in a culture clearly tilted towards Anglo kids with money and connections, in Southern California which had a relatively progressive legal community. If Larry and I had been arrested in Alabama, the traumas might have extended indefinitely. Looking from the LL intersubjective, in 1968 Alabama prosecutors and judges *enjoyed* throwing the book at drug-selling hippies, and were supported and conditioned by LR laws that equated what Larry and I did to manslaughter. If Larry and I had been arrested in Alabama, we might still be in jail!

States of consciousness everywhere

You'll notice how my states of curiosity, titillation, shame, fear, dissociation, traumatization, attraction, and anger permeate this story. All the characters constantly moved in and out of complex states of consciousness, influenced by culture (LL), laws and standards (LR), biases and previous learning (UL), and physiological states of arousal (UR). The cops who drove Larry to the courthouse were in such states of euphoria that they had a traffic accident yelling at coeds! Everyone's

states were also influenced by their altitudes on different developmental lines, by what types of people they were, and by their worldviews in different situation (whether they were primarily egocentric, conformist, rational, pluralistic, or Integral).

When my nervous system registered trauma, it sent me to a dissociated state of freeze, instantaneously recognizing that freezing was the thing to do when a screaming narcotics agent points a gun at your head. It further determined that I needed to be sensitized to guns, cops, the legal system, the government, and institutions in general. It also reinforced antipathy to letting someone else impose their values over my core values, which to this day feels unacceptable and utterly repugnant to me.

Integral consciousness as universal doner

When we habitually turn towards Wise Self and compassionate understanding, it usually indicates we generally have an Integral worldview. When we operate from an Integral worldview, we naturally look for the healthy and unhealthy aspects of everything, including our own past/present/future. We have radically diminished fear of death. We have a felt appreciation for all points of view. We see any position as just the best understanding at this moment and are open to receiving caring influence to have deeper and more compassionate understandings and actions. We recognize hierarchical authority as necessary for cultures to function, but also instinctively understand how power and authority ideally ebbs and flows from group to group, individual to individual, depending on the needs of the moment.

Appendix 2: Memory is tricky and central to trauma

Brains wire traumatic programming to keep us alive. If I almost drown playing in the pool, my brain might *instantly* program me to feel terror any time I get near a pool. There is lots of evidence that some trauma programming—especially big T traumas—happen instantaneously in extreme situations. The car wreck occurs in one second. BAM! If our nervous system reads death threat, it can instantly rewire us to be incredibly sensitive to memory triggers. Those triggers can generate

painful feelings, terrifying images, and destructive impulses seemingly randomly. This is PTSD, a particularly painful form of trauma memories.

A car wreck is *one* horrible experience. Many of us—like soldiers, police officers, or chronic abuse victims—have multiple horrible experiences. Even if we don't read death threat from any of them, cumulatively they can wear down resilience and sensitize us. Sensitized means it takes less of a trigger to evoke stronger distress for longer periods—an *expanding* problem. The more times soldiers deploy in battles zones, the more likely their frontal lobes will have problems with attention, self-awareness, and working memory, and the more likely their sensory lobes will over-react to random thoughts or innocent comments.⁸⁷

How do our brains use ongoing reality to shape our thoughts, feelings, impulses, life stories, and sense of self? Through memory.

All of our learning/understanding/reacting/relating/trauma programming is drenched with memories—and we encode memories in multiple memory systems.

Multiple memory systems?

- Remember your first kiss?
- How about your most embarrassing memory from high school?
- Remember your seventy-second kiss?
- Is there a particular scent or color that you especially like, but don't know why?
- How about your warmest and most loved moment in high school?
- Do you remember when you learned that two times two equals four?
- Are you aware of any pleasurable or painful memories influencing you at this very instant? Perhaps one cued by this question?
- When is the first time you thought, “I am a grown man or woman?”
- What were you doing or thinking two minutes ago?

- What's the most horrific personal memory you have? How do you feel in your body *at this moment* as you remember it? Are there any aspects of this memory that are weird fragments—like a sound, smell, or image?
- As a young child, you were probably afraid of the dark, or of something under the bed, or of spiders, or of something else imaginary. When did you learn to not be frightened of these things?

Multiple memory systems

These questions don't just involve different memories, they involve different *memory systems*:⁸⁸

- **Explicit memories** like your first kiss *feel* like memories--we have a sense of something being remembered. We start being able to have explicit memories around eighteen months old (when the hippocampus in our brain matures enough to encode explicit memories) and we are selective in what we remember, focusing on experiences with the most emotional impact. This is why we more easily remember our first kiss but not our seventy-second kiss—the first one was more emotionally significant.
- **Implicit memories** involve feelings, impulses, and stories that arise when cued by internal or external events, but they don't feel like something is being remembered—like a scent or color you like or dislike, but don't know why. We begin to encode implicit memories in the last trimester in utero and continue throughout life.
- **Semantic memories** and **procedural memories** are automatic capacities—like simple addition or tying our shoes—that we know how to do but can't say where or when we learned them.
- **Pleasant social memories** like the most loved we felt in high school figure into our sense of security of self in the world, our

self-esteem. They positively influence our autobiographical narratives—the stories we tell ourselves about our lives.

- **Short term memories**, like what you were doing a few minutes ago, linger briefly as long as you feel you need them, but are mostly quickly forgotten.
- **Working memory** is the material your adaptive unconscious (your Shadow-self) produces relevant to the present moment. I might mention that I was born in Hawaii, and your Shadow sends you memories of a vacation you took to Maui two years ago, so you and I can better relate. Working memory is how we negotiate our waking life in epochs of around eight seconds⁸⁹, and trauma memories can degrade it so we have trouble paying attention or feeling comfortable in our own skin.
- **Frightening or humiliating memories** like your most mortifying high school experience, can affect your sense of security of self, self-esteem, and autobiographical narratives (the stories you hold about your life), but often in a negative direction. Unintegrated, they can leave you feeling negatively about yourself as a person.
- **Unprocessed memories** can linger like a splinter in your finger. If you felt distress at your most horrific memory (anxiety, anger, sweaty palms, or increased heart rate are often signs of distress), your limbic area in the middle of your brain—especially your amygdala—is still too much involved in the memory. When our distress seems disproportionate to this moment, it can be a sign the memory hasn't been adequately processed. Adequately processed memories are centered more in the frontal cortex (especially the anterior cingulate), and we can recall even horrible events without much upset. This reflects the importance of the first stage of trauma treatment—facing the memory.

- **Body memories** are sensations or physical tendencies we've learned through experience. If we have intrusive sensations/image/sounds/tastes/smells associated with a traumatic memory, they can be a sign of a PTSD reaction (for post-traumatic stress disorder), which are more like visceral LSD flashbacks than other memories. On the positive side, if we feel a sense of warm pleasure every time we see our daughter, it's probably a sign that we associate love and joy with her.

As you can see, we don't just have *memory*, we have many *kinds* of memory, arising from all parts of our body/mind/spirit systems.

Even more, every time we retrieve and experience a memory, we alter it to some extent. This means that when we remember something we are at least partially remembering the last time we remembered it.

This is a huge big deal! You can see how our ability to change the meaning and emotional signature of memories impacts all four stages of dealing with traumas. Why? Because one of the great discoveries of modern trauma treatment is that when memories arise, *we can alter and clarify them with different forms of attention*. I'm not talking primarily about altering the objective facts about what we remember happening to us (though that occasionally happens), but rather changing *the emotional meaning* of what we remember.

Trauma doesn't exist without memory. Sure, we can be *hurt*, but emotional and physical injuries either heal or kill us. Once we heal, we get on with living.

Trauma issues—toxic influences, warped beliefs about ourselves and the world, and intrusive pain/distortions interfering with our lives—exist in memories that intrude into the present moment to protectively warn us and drive us to fight, flight, freeze, or fawn (submit).

What all this means is that *healing trauma involves integrating traumatic memories from many memory systems.*

Wait...what?

That's right! Healing trauma is integrating traumatic memories from many memory systems. When we integrate distressing memories (which exist simultaneously in multiple memory systems) we transform them from roadblocks-to-health into wellsprings-of-wisdom that help us understand ourselves and the world more compassionately.

For example:

Ally was physically, psychologically, and sexually abused by both parents until junior high school when she and her siblings reported them to the police and the kids were put in foster care. Brilliant and conscientious, Ally put herself through college and law school, but had trouble trusting her partners in intimate relationships. As lovers felt close enough to feel like family members, Ally could quickly be triggered into blind rage by seemingly innocuous cues. She married an alcoholic teacher, leading to a tumultuous relationship where escalating conflicts were common, but also left Ally feeling powerless to set limits for her husband's binges and social gaffes.

Referencing the AQAL system described in Appendix 1, trauma reactions can be triggered from all four quadrants: intersubjectively in emotional connections with others, interobjectively in being reminded of the event from environmental cues like sights and sounds, individually neurobiologically from how our brains and bodies react and are biochemically primed, and phenomenologically in our own subjective sense of self. All this can generate daydreams, night dreams, images, feelings, and impulses. Ally had many trauma memories and sensitizations, and during the first stage of facing the traumas we patiently explored each one until she could revisit them in our sessions with some equanimity.

Healing from trauma *requires* shifts in our subjective being and objective neurophysiological wiring—the UL and UR quadrants. Ally

needed to reprogram her brain and consciousness by working the four stages. She also needed help from the LL intersubjective quadrant in the form of loving connections with others, and in the LR interobjective quadrant from caring social standards, and so she joined a support group where she could share her experience with other abuse survivors. All that being said, healing ultimately took place within her individual consciousness and biochemistry—the UL and UR.

All of Ally's memory systems were involved in our work. Ally eventually could discuss any of the incidents with compassionate understanding, which led us into the second stage of resolving trauma, helping her grow her life story.

Clarifying and deepening memories—transcending pain into wisdom

As you can see, healing traumatic memories doesn't eliminate them! They become part of our autobiographical narratives—ideally as clarifying and transformative moments that symbolize heroic struggles from victimization to triumph. Such transformations are central to the second stage of trauma work—growing your life story.

As I've said countless times in therapy sessions over the last forty-eight years, the only thing that makes trauma tolerable (*never* preferable) is to work through it to become stronger and wiser on the other side.

Why is this so damn hard?

Human beings are the most magnificent rememberers of any species ever. People talk about elephants. Elephants are pretty smart, and do have extensive memories, but nothing like us. This is especially true for traumatic memories because our nervous systems are wired to protect us. Distressing experiences do not automatically turn into trauma memories. Most of the time people are fine after even the most horrendous events. After major big T traumas the overwhelming majority of people get on with life with minimal consequences. So, what causes some distressing events to be easily integrated, and others to result in trauma memories?

Ultimately it is our nervous system plus our non-conscious adaptive unconscious Shadow-self that decides the difference between a stressful event and a trauma. For instance, then when I was 11 years old, I was riding down the street on my bicycle and my neighbor Jean zoomed out of his driveway in his jeep and hit my bicycle. The impact broke my bicycle and knocked me to the ground and was a stressful event, but my nervous system/Shadow didn't program it as traumatic. I didn't feel bad about myself. I didn't feel bad about Jean. I wasn't more cautious riding my bike. No big deal.

About six years later, I was driving down the freeway in my family's old 1954 Ford and I fell asleep at the wheel. I drifted over three and a half lanes and barely woke up in time to steer back onto the highway and not get killed. This event did involve trauma programming. Since that moment, I'm a little extra frightened of driving when I'm sleepy. Even today, when I remember nodding off and drifting out of control, I feel a little bit of shame and distress. My nervous system, my unconscious Shadow self, programmed a trauma reaction that still occasionally requires healing attention, especially when I find myself sleepy while driving.

In my book, *Shadow Light: Illuminations at the edge of darkness*, I suggested that our entire unconscious (what I call the Shadow-self and what some neuroscientists call the adaptive unconscious) constantly communicates to us through constructive and destructive stories/memories/feeling/impulses. Most psycho/spiritual/relational development involves *growing our Shadow-selves* to progressively guide us in more constructive and less destructive directions.⁹⁰

Neuroscientist Joseph LeDoux has demonstrated that once a trauma memory is installed into our nervous system, it's there to stay.⁹¹ We can learn to notice a trigger and feel the trauma memory intruding and then direct ourselves into a different state of consciousness—this is the essence of the third stage of working with trauma. If we do this enough, our Shadow-selves—our adaptive unconscious—can eventually regulate away from the trigger *without our conscious awareness*.

In other words, when we're freaked out by something and then progress to not being freaked out, it's not that the freak-out reaction is *gone*. We have grown our frontal cortex to *reflexively regulate* the freak-out before it reaches conscious awareness. The freak out still *begins* to happen, but our unconscious catches it and regulates it before we even notice we're triggered.

As far as trauma goes, trauma reactions are generated by our limbic midbrain, but then *reflexively regulated* by our more modern frontal cortex (one of the newest evolutionary additions to our brains). This is done *automatically* when we've grown our Shadow-self to the point the trauma reactions are regulated before they reach conscious awareness, or *deliberately* if we have learned to compassionately self-reflect and self-regulate when triggered.

We can regulate better (with compassion and connection), or worse (with self-destructive habits and toxic relationships). Interestingly, all of our self-regulatory capacities include some form of dissociation—reflexively or deliberately disconnecting from, or shaping, our experience of the present moment. For better or worse, dissociation is one of our human superpowers.

Dissociation superpower

One huge driver of most psychological defenses is our superpower of dissociation. Dissociation is our ability to block out some thoughts, feelings, ideas, or memories and focus on others, or shift from one state of consciousness to another, often without realizing what we're doing. We do this *all the time*. I just dissociated getting my laundry out of the dryer for ten minutes while I was writing the previous paragraph.

I call dissociation a superpower because it helps us focus on the present moment by blanking out distractions, and dramatically altering, amplifying, or shutting out memories, feelings, stories, and impulses to enable us to get around in the world. Like most other aspects of human functioning, there are both healthy and unhealthy forms of dissociation.

An example of healthy dissociation is driving to the beach and not particularly paying attention to your driving, but it's OK because your habits of driving safely are taking over while you're happily wondering if there will be surfable waves today. Suddenly, you realize that for the last ten minutes you haven't consciously seen anything on the road. You haven't paid attention to anything and yet you've been driving safely. How is that?

You dissociated conscious awareness away from everything around you and allowed your driving habits to take charge. While your unconscious habits drove, your conscious awareness was imagining playing on the beach—healthy dissociation.

What's unhealthy dissociation? Your husband comes home and says, "I just bought an \$80,000 new Mercedes!"

You literally blank out, but quickly see red and feel a pounding pulse in your ears, screaming, "What!! You buy an eighty-thousand-dollar car and don't talk to me about it? How dare you! You selfish infant!" Everything good about your husband has disappeared. The idea that he might have had a reason to buy the car doesn't exist for you. Everything is blanked out—dissociated—except your desire to attack him for committing such an apparently alarming and insane act.

With most mammals, dissociation helps them be in the present moment and not stress what's happened in the past or likely to happen in the future. If you're a gazelle trotting across the savannah and a cheetah charges you, you freak out and run away. Run, run, run!

If you're a lucky and healthy gazelle, you get away because, with a little bit of a head start, a gazelle can evade a cheetah. When you realize you've gotten away and the cheetah is not there anymore, you run a little bit more, find some other gazelles to hang out with, and shake for a while. Your nervous system discharges the stress, and you're soon back happily munching on grass, not particularly stressed out. You have

blocked off the recent trauma—dissociated—and are getting on with your gazelle life.

If my human consciousness was in that gazelle, I could be looking at the grass and going, "Oh my God! I almost got killed by a cheetah! That cheetah is going to come eat me!" I might have trouble thinking about anything else for a long time, because my human brain is way more evolved than a gazelle brain. Humans can remember the past, anticipate the future, and fantasize about what might happen, and so we have many more capacities to be traumatized by painful events—to obsess, repress, suppress, freeze, scapegoat, project and deny. All of these defenses involve dissociation and memory. This illustrates an Integral principle of development that Robert Kegan calls the dialectic of progress⁹²—meaning that with each new evolutionary level of complexity comes new potential problems.

While animals dissociate to stay present, people's nervous systems often use pathological dissociation *to stay out* of the present moment. If it was me barely escaping a cheetah's attack, my mind might not be able to think about anything else. After I got away and later that night am watching the sunset with my family, I might not be enjoying the sunset because there's a part of me still cycling through, "There's cheetahs out there. I almost got killed! Maybe I'll get killed tomorrow!" Normally, such immediate stress reactions pass quickly, but, if trauma programming has taken place, we can have more pronounced, potentially crippling reactions right away (acute stress reactions), or delayed reactions months *or years* later (post-traumatic stress reactions).

You can see how dissociation is self-protective. Initially I'm dissociating away from the present moment because my memory systems are focused on danger. But if I keep at it all the time, even when there's no possible way a cheetah could injure me, I'm in trouble. If stress reactions don't quickly subside, but instead continue to show up later, and even get worse, I'm on my way to an obsessive disorder where I'm dissociating from the present moment increasingly as I ruminate about being vulnerable, or a depressive disorder where the world and me both suck,

or some other habitual stress reaction that takes me out of the safe present moment. In the ruminating case, my brain is trying to protect me from a non-existent threat by keeping that threat on my mind all the time. I've become so sensitized that I easily dissociate from the present moment and enter fear-of-cheetahs defenses.

Big T and little t traumas can program us to have unhealthy dissociations when we're triggered by reminders of distressing events—sensitization. When triggered, our nervous system (adaptive unconscious, Shadow self) activates our original, primitive solutions—feeling frozen, arguing, denying, raging, fawning, collapsing into shame, or fleeing—and we alarmingly lose our abilities to think and act kindly.

For instance, maybe when you were small your parents got drunk and attacked you or each other with hostile attitudes and cruel words. Maybe they hit you when they got angry or frustrated with your little kid mistakes or emotional overloads. Maybe your response to this chaos was to blank out and shut down (a common response to extreme stress in infants and young children).

Let's fast forward. You're 25, 35, 45, 55. You're watching TV with your wife and she begins to get a little bit angry with you...and you find yourself just kind of blanking out and getting distressed. She recedes and you can't quite understand the point she's making. You've dissociated from the present and are relating emotionally from the solutions you programmed for those ancient parental threats and abuses.

People who have PTSD (post-traumatic stress disorder) have had their nervous systems rewired to activate their trauma memory systems to disconnect them from *now*, and this is a big deal because it can have a broad ranging effect on how we experience the world.

Alexander McFarlane in Australia wanted to explore the difference between traumatized brains and non-traumatized brains, so he recruited a bunch of traumatized and non-traumatized adult Australians. He

hooked them up to EEG machines and he gave them a stimulus—the spoken word "Eh."

With the normal people, the first thing that happened hearing "Eh," was that their brain generated a wave called N200 that shut down all the rest of their brain except the frontal cortex which was focused on this present moment event—the researcher making this weird "Eh" sound. Normal people quickly made sense of the situation and concluded “This is no big deal.”

Traumatized people did not generate the N200 wave. Their brain reacted in a diffused way. They weren't able to concentrate the way that the normal people did. Their brains had lost the capacity to appropriately focus on the present moment. They were dissociating in an unhealthy way by staying out of the present moment *in response to a random stimulus*.⁹³

This last reflects how crippling trauma reactions can be. They don't just affect us when we're triggered by a reminder of the trauma, *they can sometimes degrade our entire capacity to stay present.*

Dissociation is central to psychological defenses

We start dissociating in one way or another from birth onwards. Infants and children don't have the cognitive or verbal skills to think or talk their way through unpleasant experiences, so young nervous systems program solutions to emotional and physical pain through dissociation and defensive habits. When small children have an unpleasant experience, their nervous systems try to avoid it. Why? Shame is painful. Fear is painful. Sometimes anger is painful. Disgust is painful. Anxiety is painful. Other's disapproval is painful. All are threatening, and our Shadow-selves try to help us by programming strategies (defenses) to protect us.

Blaming someone else (projection) reduces the pain. Blaming or attacking ourselves (reaction formation) can reduce pain because we're aligning ourselves with the abuser and indirectly expressing anger.

Denying responsibility or outright lying (denial) can reduce pain.
Getting mad at someone or something else (scapegoating) reduces pain.

Unfortunately, all these short-term solutions create long term problems if we don't integrate our defenses into more modern and effective ones like compassionate understanding and healthy relating.

What helps us integrate defenses? Working the four stages of trauma treatment! The first stage of facing trauma often involves engaging in good relationships that focus on interior experiences (upper left and lower left quadrant) in safe environments. If we can self-reflect with caring, empathic others in safe and secure contexts (like secure families, a good therapeutic relationship, or a supportive self-aware community), we can progress on the integration-of-defenses line of development, and our Shadow selves start providing more sophisticated and mature responses to painful experiences—like compassionate understanding, processing with wise others, or seeking help from appropriate sources. As these new responses become more habitual, it gets easier to tolerate and respond to difficult situations and triggers, which facilitates the second stage of trauma treatment—growing our life stories.

Appendix 3: Personalities are the base note of change work

Personalities are base notes—they are the collective instinctive strengths and weaknesses in each person's responses to the world that *feel normal to them*. They are a form of *type*.

A *personality disorder* is an extremely maladaptive personality organized around deficits in a person's ability to deal with the world, and *instinctive reactions* that cause significant problems in important realms. A person with paranoid personality disorder instinctively suspicious of most everyone. A person with narcissistic personality disorder instinctively feels better than others and more entitled to special treatment.

Maladaptive personality traits occur on a continuum from milder impairment to major impairment. They generally reflect people

being habitually less flexible, adaptive, and socially appropriate in ways that cause drama rather than solve problems.⁹⁴ Drama is participating in the persecutor/rescuer/victim triangle (discussed in detail in Chapter 6).

- On the more functional end of the impairment continuum are people having problems with maladaptive habits of being, but some ability to receive influence without extreme resistance and who have some capacities to change behaviors.
- On the less functional end are people having significant problems with maladaptive habits of being, with little or no ability to receive influence, and no effective self-awareness of their toxic traits.

Whatever mode of therapy you're using, it's beneficial to keep influencing clients to install missing capacities in their personalities and take responsibility for problems stemming from maladaptive personality traits. It's always a good idea to help people be more flexible, adaptive, and appropriate. This is both *especially difficult* and *crucially important* with personality disorders.

What are personality disorders?

Our personality is a tool kit with different capacities embedded in traits—like empathy, trust, self-awareness, defensiveness, self-regulation, and a sense of humor—which we instinctively bring to bear on different problems. Some people have *personality disorders* that allow them to only have one tool to bring to bear on multiple situations, whether the tool is effective or not. Paranoid people are consistently suspicious, avoidant people are consistently resistant to social risks, etc. The end result is that in situations where the one tool isn't adaptive, the person creates drama instead of solving problems, because the rigidity causes others to get frustrated, confused, and exhausted. Because the person with the rigid reaction can't adapt, *others are forced to adapt to them*.

Some research suggests that 15% to 19% of the general population have a major deficit in their personalities that cause them and others significant distress.⁹⁵ For example:

- Obsessive compulsive personality disorder (2% to 8% of the general population, 3% to 10% clinical population) reflects someone who is rigid, controlling, and prone to flashes of anger when not in control. This person lacks *flexibility*.
- Narcissistic personality disorder (1% of the general population, 2% to 16% of the clinical population) reflects someone who is grandiose, entitled, and manipulative. This person lacks *a sense of equality with other people*.
- Borderline personality disorder (1.6% of the general population, 10% of psychiatric outpatient population and 20% inpatient population) reflects someone who cycles chaotically from normal to extremely distressed with accompanying distorted stories and destructive actions towards self and others. This person lacks *proportionality*.⁹⁶

People with personality disorders resist awareness of their deficits and refuse to take true responsibility for their problems. They enter therapy because of problems with people's reactions to their trait, not because they believe the trait is their problem. The foundation of their therapy—no matter what their presenting problem (which is often an artifact of, or amplified by, their maladaptive trait)—involves helping them become aware of their deficits and take responsibility to cultivate the missing capacities and observe how their one tool often creates drama rather than solves problems.

We need an observing ego, a Witness

Most change work involves helping people activate a compassionate Witness, an observing ego, who can see maladaptive traits, take responsibility for consequences of those traits, and self-correct to become healthier. People with personality disorders have little or no functional observing ego and need to develop a Witness to observe their maladaptive traits to be able to gradually install missing capacities and reduce maladaptive behaviors.

Working with personality disorders

Let's look at how to identify and work with one famous personality disorder—borderline personality disorder (BPD):

Diagnosis: This person *consistently* shifts chaotically from seemingly normal to extremely distressed, reactive, and aggressive. They shift from feeling grandiose to feeling worthless, from feeling admiration to feeling moral hatred. They lack a sense of *proportionality*.

Therapeutic base note: Help them install proportionality, while reducing chaotic instability.

First task: Help them develop an observing ego (the compassionate Witness). This means cultivating actual brain circuits through attunement and mindfulness practices, and then learning how to bring compassionate self/other awareness to destructive traits.

Continuing work: Help with all the problems (dramas mostly arising from their personality disorder) with the continuing base notes of increasing proportionality and regulation of distorted extremes in emotions, thoughts, and behaviors. With the base note attended to, we can work with the higher notes—such as anxiety, depression, intimacy, spirituality, mastery, social intuition, substance abuse, and transforming trauma into transcendence—while still emphasizing the foundational work of installing proportionality and reducing chaos.

Boundaries are necessary: Therapy is often difficult with personality disorders, requiring therapists to be clear and targeted in their approach. Since personality disorders generate drama, it's important for a therapist to set boundaries to not participate in drama. Examples are politely disagreeing with extreme hostile interpretations, insisting on consistent rules for participation and payment in sessions, and refusing to make exceptions to ethical standards like avoiding dual relationships and not making special deals with certain clients. Just like good parenting,

psychotherapy focuses on maintaining empathic attunement while setting healthy boundaries when necessary.

Couples where one or more has BPD: Help them agree to standards of respect, kindness, and self-regulation for everyone, and then use that agreement as an entryway to install *felt* emotional proportionality and self-correcting skills. It will be enormously difficult for the partner with borderline personality disorder to do all this, but the shared-standard approach makes it easier for each partner to take responsibility for problems and normalize the need to install new skills and make regulatory efforts.

Rinse and repeat

The above basic therapeutic model applies to most other personality disorders such as:

- **Obsessive compulsive personality disorder**—where the client needs to develop flexibility, reduce needing rigid control, and stop indulging surges of anger and frustration.
- **Narcissistic personality disorder**—where the client needs to develop a sense of equality with other people and reduce grandiose, manipulative entitlement.
- **Dependent personality disorder**—where the client needs to develop a sense of autonomy and reduce the compulsion to comply with others' direction.
- **Avoidant personality disorder**—where the client needs to develop social courage and reduce anxious isolation.

Blindspots migrate through vMEMEs. Any of these problem traits can show up in any vMEME—meaning worldviews such as egocentric, conformist, rational, or pluralistic. Since vertical development involves more awareness, you tend to find more elaborate rationalizations for blindspots in progressive value memes. Harvey Weinstein was so successful in his rational orange culture that his sense of grandiose entitlement to sexually abuse women was supported by others' fear of his power and admiration of his success.

Blindspots generally reflect the pathologies of worldviews rather than their virtues. We all have blindspots—what I’ve called “normal crazy”—but personality disorders have major blindspots with fierce resistances to awareness and change—what I’ve called “extra crazy.”⁹⁷ Personal evolution always requires attention to blindspots.

Shadow work: All the above involves Shadow Work, because our Shadow, our adaptive unconscious, is all those aspects of self that are not currently visible to us and which constantly arise to deal with the world depending on current inputs.

- Normal crazy can often hear critical feedback and receive influence to try alternate thoughts and behaviors.
- Extra crazy resents and defends against feedback and has enormous difficulty being different in stressful situations—continually reverting to their primary trait of emotional chaos, rigid control, manipulative superiority, etc.

Appendix 4: The triple threat model of human suffering

In the 57 years I’ve been studying psychology there have been three schools of thought about where psycho/emotional/social suffering comes from—nurture, trauma, and nature.

Nurture: The nurture explanation for suffering is based on psychoanalytic theory, social psychology, attachment research, thousands of case studies, epidemiological data, and many longitudinal developmental studies. Much of this data shows evidence supporting the idea that family, environmental, and cultural experiences strongly influence individual suffering.

- The psychoanalytic model concludes that misattuned parents treating a child badly can create internalized conflicts which later need healing insights and integration to resolve.
- The attachment model developed by John Bowlby and Mary Ainsworth strongly suggests that parents who are not adequately present, congruent, or marked in their baby’s first year generate

insecure attachment styles in some children that tend to persist into adulthood.

- Social psychology, based on comparing different cultural experiences shows that cultural standards and taboos have major effects on human functioning. For example, if you received Dutch sex education you are significantly less likely to have distressed sexual relationships, STDs, abortions, and sexual conflicts with lovers and family members than if you received a typical U.S. sex education. If you are black in the U.S, you are much more likely to be incarcerated, oppressed, and discriminated against than if you are black in Uganda. Being poor in Sweden is not as potentially catastrophic as being poor in the U.S. Social variables affect each person's levels of distress to some extent.
- Epidemiological studies suggest that environmental toxins and socio-economic pressures can contribute to and amplify psycho/social suffering. For example, the U.S. diet is associated with chronic inflammatory disease, which tends to increase anxiety and depression levels. Other examples of environmental and social contributions to suffering are toxins like mercury and governmental/cultural disasters like wars and economic meltdowns.

Trauma: The trauma theory of human suffering is based in learning theory, social psychology, and interpersonal neurobiology. This research has shown that adverse childhood events, traumatic events at any age, and/or toxic cultural elements can determine adult suffering to some extent. The famous Adverse Childhood Experiences study by Lawrence Felitti demonstrates that the more often forms of abuse, neglect, or other painful disruptions like divorce or having a parent incarcerated, the more likely someone is to have most forms of psychological and emotional disorders (as well as many kinds of physical disorders).⁹⁸

Thousands of trauma studies have documented negative consequences from trauma for many (but not all, or even most) trauma survivors. Treatment studies from EMDR, somatic reexperiencing, neurofeedback, and dual focus therapies have demonstrated relief from symptoms for

people identifying as having post traumatic conditioning from Big T or small t traumatic events.⁹⁹

Nature: Twin studies have yielded the amazing conclusion that personality traits are generally 40% to 60% heritable.¹⁰⁰ This includes capacities for depression, anxiety, shyness, OCD, introversion, emotional reactivity, divorce, and other psychosocial problems.

Much more significantly, personality disorders—where people have major life-disrupting deficits in capacities like empathy, trust, proportionality, self-regulation, or self-awareness—have been shown to be 70% to 80% heritable, and that the other 20% or 30% cannot be reliably attributed to family environment. Current epidemiological data suggests that 15% to 19% of the general population can be diagnosed with a personality disorder, which is a pervasive and enduring characteristic pattern of behavior that disrupts more than one important area of life.¹⁰¹ People with personality disorders generally experience their distress as a function of other peoples' reactions to their personality problem rather than as a function of their personality deficits, and strongly resist suggestions to the contrary. This makes treatment of personality disorders (extra crazy) generally more difficult than working with people who welcome feedback about their personal blindspots (normal crazy).

WTF?!!

Which is right? Nurture deficits? Trauma? Genetic programming? Which explanation reflects the main source of psycho/emotional/social suffering? Even more importantly to therapists, coaches, teachers, and change workers of all kinds, what does this mean about helping people with distress?

Talk to aficionados of one approach or another, and they'll usually have a conscious or unconscious bias for one or two explanations, and subtle resistance to the significance of one or two of the others.

The triple threat theory of human suffering—everybody gets to be right, but nobody is right all the time

Integral theory says that everybody gets to be right, but nobody gets to be right all the time, and the data supports the idea that every individual is unique in how they are formed, and, more importantly, how they grow.

Nature, nurture, and trauma all affect each person's palette of problems to some extent, with one source being more prominent at any given moment for every type of person with their unique life experiences.

How to help?

In this book I emphasize identifying and treating traumatic sensitization to enable people to develop more resilience. I've offered a four-stage model for addressing all three sources:

#1: Face the trauma.

#2: Grow your life story to include the trauma as a transformative event.

#3: Learn to choose healthier states of consciousness.

#4: Compassionately self-observe to know when something new or old needs to be addressed with stages 1 through 3.

The problem with writing a book that emphasizes trauma is that it tends to minimize nature and nurture as causes of suffering. When people are suffering from trauma learning, it's generally best to begin with the trauma, and then proceed to other forms of work if the client doesn't feel themselves moving satisfactorily towards living a happy ending at the beginning of something wonderful.

For psychotherapists, it's important to know the inherent problems in diagnosing and treating people with different histories and personality structures.

Consider three women who endure the same horrible car wreck and are having panicky flashbacks to sounds, sights, and smells of the accident at the slightest trigger. One woman has paranoid personality disorder,

one has no pre-wreck problems, and one had a preoccupied self-absorbed mother her first year of life, resulting in an angry resistant insecure attachment style. All have entered therapy to deal with their PTSD symptoms.

- Paranoid person is suspicious of the therapist and resists any interventions like EMDR which involve surrendering to a therapist's direction. She especially is offended when the therapist suggests that her chronic suspicion reflects a deficit in her ability to appropriately trust others.
- Normal person eagerly tries first dual-focus treatment and then expanding her autobiographical narrative to experience the accident as a transformative ordeal in a heroic life journey. She leaves therapy relieved and feeling wiser and stronger as a result of her work.
- Insecurely attached woman dramatically reduces her PTSD symptoms but is dissatisfied with her current relationships and complains to the therapist that she's "Still not happy."

All have gone to the same therapist who is using the same four stage model of treating trauma. Clearly paranoid person and insecurely attached person need more work to progress, but that work has less to do with trauma and more to do with self-awareness and correcting deficits in trust, intimacy, and self-identity. Like the trauma work, this involves facing the problems, growing life stories, choosing healthier states, and developing compassionate self-awareness to navigate future distress, but that work requires the therapist to know the triple threat material and apply it practically. This is possible but often fiendishly difficult and potentially confusing depending on all we've discussed so far.

Whatever the situation, I've found it *incredibly useful* to know the triple threat model, and I encourage you to consider using it to understand your and other's pain.

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